

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90002 020 ****61.25

DOCUMENT # 714677

1. Entity Name

LAKESIDE POINT APARTMENT NO. 8 ASSOCIATION, INC.
A CONDOMINIUM ASSOCIATION

Principal Place of Business

Mailing Address

2304 LAKE OSBORNE DRIVE
 LAKE WORTH FL 33461

2304 LAKE OSBORNE DRIVE
 LAKE WORTH FL 33461

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2381378

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EGNER, CAMEY
2304 LAKE OSBORNE DR
APT 5
LAKE WORTH FL 33461

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** Delete
 NAME **WATLING DOROTHY**
 STREET ADDRESS **2304 LAKE OSBORNE DR**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE **Treasurer + Director** Change Addition
 NAME **Dorothy Watling**
 STREET ADDRESS **2304 Lake Osborne Dr.**
 CITY-ST-ZIP **Lake Worth, Fl.**

TITLE **P** Delete
 NAME **EGNER, CAMEY**
 STREET ADDRESS **2304 LAKE OSBORNE DRIVE**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DV** Delete
 NAME **GRAY, ROY**
 STREET ADDRESS **2304 LAKE OSBORNE DR**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **METZLER, JAMES**
 STREET ADDRESS **2304 LAKE OSBORNE DR**
 CITY-ST-ZIP **LAKE WORTH FL 33461**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **GRAY, DIANE**
 STREET ADDRESS **2304 LAKE OSBORNE DR**
 CITY-ST-ZIP **LAKE WORTH FL 33461**

TITLE **Secretary + Director** Change Addition
 NAME **Diane Gray**
 STREET ADDRESS **2304 Lake Osborne Dr.**
 CITY-ST-ZIP **Lake Worth, Fl.**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **GRIMES, IRENE D**
 STREET ADDRESS **2304 Lake Osborne Dr**
 CITY-ST-ZIP **Lake Worth Fl 33461**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Camey Egnor
Signature Required
Camey Egnor

Feb. 18, 2002

(561) 582-3887

CR2E037 (9/01)