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Feb 06 1997 8:00am
Secretary of State



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

NONPROFIT CORPORATION
ANNUAL REPORT
1997

DOCUMENT # 737688 (2)
1. Corporation Name
LAKESIDE VILLAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
1130 N LAKE PARKER AVE 1130 N LAKE PARKER AVE
LAKELAND FL 33805 LAKELAND FL 33805-4756

3. Date Incorporated or Qualified 12/27/1976
3a. Date of Last Report 01/31/1996
4. FEI Number 59-1804125 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt #, etc 26 Suite, Apt #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
PANZICA, ANTHONY B.
1130 N. LAKE PARKER AVE. B-315
LAKELAND FL 33805

10. Name and Address of New Registered Agent
81 Name FRANCIS R. MAC CANON
82 Street Address (P.O. Box Number is Not Acceptable) 1130 N.LAKE PARKER AVE. A-210
83
84 City LAKELAND, FL 85 Zip Code 33805

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Francis R. Mac Canon* Jan. 30, 1997
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	VD <input type="checkbox"/> DELETE
NAME	GLOVER, JIM
STREET ADDRESS	1130 N. LAKE PARKER AVE.
CITY-ST-ZIP	LAKELAND FL
TITLE	T <input checked="" type="checkbox"/> DELETE
NAME	TROIANO, ANN
STREET ADDRESS	1130 N. LAKE PARKER AVE.
CITY-ST-ZIP	LAKELAND FL
TITLE	D <input type="checkbox"/> DELETE
NAME	NAGLE, JOHN
STREET ADDRESS	1130 N. LAKE PARKER AVE.
CITY-ST-ZIP	LAKELAND FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	GRAHAM, HAROLD
STREET ADDRESS	1130 N. LAKE PARKER AVE.
CITY-ST-ZIP	LAKELAND FL
TITLE	DS <input checked="" type="checkbox"/> DELETE
NAME	DOOLIN, LUCILLE
STREET ADDRESS	1130 N LAKE PARKER AVE
CITY-ST-ZIP	LAKELAND FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	FREDERICK, WILLIAM
STREET ADDRESS	1130 N. LAKE PARKER AVE.
CITY-ST-ZIP	LAKELAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	JAMES C. GLOVER
1.3 STREET ADDRESS	1130 N.LAKE PARKER AVE.A-106
1.4 CITY-ST-ZIP	LAKELAND, FL., 33805
2.1 TITLE	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	ROBERT J. MINISCIA
2.3 STREET ADDRESS	1130 N.LAKE PARKER AVE. B312
2.4 CITY-ST-ZIP	LAKELAND, FL., 33805
3.1 TITLE	V/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	JOHN J. NAGLE
3.3 STREET ADDRESS	1130 N.LAKE PARKER AVE. B-213
3.4 CITY-ST-ZIP	LAKELAND, FL., 33805
4.1 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	JEFFERSON B. HUDSON
4.3 STREET ADDRESS	1130 N.LAKE PARKER AVE. A-310
4.4 CITY-ST-ZIP	LAKELAND, FL., 33805
5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	MANUEL A. VEGA
5.3 STREET ADDRESS	1130 N.LAKE PARKER AVE. B-216
5.4 CITY-ST-ZIP	LAKELAND, FL., 33805
6.1 TITLE	S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	FRANCIS R. MAC CANON
6.3 STREET ADDRESS	1130 N.LAKE PARKER AVE. A-210
6.4 CITY-ST-ZIP	LAKELAND, FL., 33805

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert J. Mendicino* JAN. 30, 1997 (941) 688-1485
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0052767

CR2E087 (9/96)

**LAKESIDE VILLAGE
CONDOMINIUM ASSOCIATION, INC.**
1130 NORTH LAKE PARKER AVENUE
LAKELAND, FLORIDA 33805

ADDITIONAL NAME

D
ANTHONY B. PANZICA
1130 N.LAKE PARKER AVE. B-315
LAKELAND, FL., 33805