## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 756827**

MEISNER, RHODA

TEITZMAN, MELVIN

10203 MANGROVE DR #106

BOYNTON BEACH, FL 33437

BOYNTON BEACH, FL 33437

( ) Delete

10155 MANGROVE DR SUITE 205

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

FILED Jan 07, 2009 Secretary of State

Entity Name: LAKESIDE CONDOMINIUM ASSOCIATION NO. 2, INC.

**Current Principal Place of Business: New Principal Place of Business:** 10780 CEDAR POINT BLVD BOYNTON BEACH, FL 334371315 **Current Mailing Address: New Mailing Address:** 10780 CEDAR POINT BLVD BOYNTON BEACH, FL 334371315 FEI Number: 59-2156570 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **CUSTOM PROPERTY MANAGEMENT** 2328 S CONGRESS AVE STE 2A WEST PALM BEACH, FL 33406 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition GRANET, LARRY, GRANET, LARRY, Name: Name: 10187 MANGROVE DR #205 Address: 10187 MANGROVE DR #205 Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: BOYNTON BEACH, FL 33437 Title: () Delete Title: (X) Change ( ) Addition BAIN, GEORGE Name: BAIN, GEORGE Name: Address: 10187 MANGROVE DR 102 Address: 10187 MANGROVE DR 102 City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: BOYNTON BEACH, FL 33437 Title: () Delete Title: (X) Change ( ) Addition

 Title:
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 Name:
 SHEVACK, JOAN
 Name:

 Address:
 10155 MANGROVE DR 203
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33437
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

MEISNER, RHODA

10203 MANGROVE DR #106

BOYNTON BEACH, FL 33437

() Change () Addition

SIGNATURE: MELVIN TEITZMAN P 01/07/2009