2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM.
Secretary of State

DOCUMENT # 762353

1. Entity Name
LAKESIDE AT LOCHMOOR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2069 W LAKEVIEW BLVD E12 NO FT MYERS, FL 33903 US	2069 W LAKEVIEW BLVD E12 NO FT MYERS, FL 33903 US

DO NOT WRITE IN THIS SPACE

01152006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-2243864
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PRICE, ALFRED G JR
2067 W LAKEVIEW BLVD
D11
NO FORT MYERS, FL 33903

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Alfred G Price Jr. Alfred G. Price, Jr. 1-16-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS
TITLE	PD
NAME	PRICE, ALFRED G JR
STREET ADDRESS	2067 W LAKEVIEW BLVD D11
CITY-ST-ZIP	NORTH FORT MYERS, FL 33903
TITLE	VD
NAME	SAMPAIR, SUSAN
STREET ADDRESS	2067 W LAKEVIEW BLVD D9
CITY-ST-ZIP	NORTH FORT MYERS, FL 33903
TITLE	TD
NAME	NELSON, JULIA D
STREET ADDRESS	2067 W LAKEVIEW BLVD D8
CITY-ST-ZIP	NORTH FORT MYERS, FL 33903
TITLE	SD
NAME	MIEURE, REBECA
STREET ADDRESS	2069 W LAKEVIEW BLVD E5
CITY-ST-ZIP	NORTH FORT MYERS, FL 33903
TITLE	D
NAME	HAYWORTH, PATRICIA
STREET ADDRESS	2069 W LAKEVIEW BLVD E6
CITY-ST-ZIP	N. FT. MYERS, FL 33903
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000398845
01/31/06-80014-007 70.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Alfred G Price Jr Alfred G Price Jr 1-16-06 239 823 6479
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #