2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2002 8:00 am
Secretary of State
02-01-2002 90007 036 ****61.25

DOCUMENT # 763920

1. Entity Name

LAKESIDE VILLAGE HOMEOWNERS ASSOCIATION OF PINEL LAS, INC.

Principal Place of Business	Mailing Address
3868 107 AVE. CLEARWATER FL 33762 US	P.O BOX 729 ST. PETERSBURG FL 33731-0729 US

DO NOT WRITE IN THIS SPACE

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 59-2465126 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ERDMAN, J J 33 4TH STREET NORTH SUITE 2070 SAINT PETERSBURG FL 33701	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LUCEK, VALERIE 3985 LAKE BLVD CLEARWATER FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RICHARD BOWER 3807 107TH AVE. N. CLEARWATER, FL. 33762	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JUDD, ARLENE 3940 107TH AVE. N. CLEARWATER, FL 00000	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PAMELA DOUBERLY 10659 41st. COURT CLEARWATER, FL. 33762	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SCHNURR, PETER 3916 107TH AVE N CLEARWATER FL 33762	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CHARLES BRUNS 3917 107TH AVE. N. CLEARWATER, FL. 33762	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Arlene Judd (SIGNATURE REQUIRED) President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/02 Date

727-821-4891 Daytime Phone #