2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2007 8:00 am
Secretary of State
01-18-2007 90091 038 ****61.25

DOCUMENT # 763920

1. Entity Name
LAKESIDE VILLAGE HOMEOWNERS ASSOCIATION OF PINELLAS, INC.

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

66003970

01082007 No Chg-NP CR2E037 (4/06)

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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

ERDMAN, J J
696 1ST AVE. NORTH
STE. 102
SAINT PETERSBURG, FL 33701

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BOWER, RICHARD
STREET ADDRESS	3807 107TH AVE N
CITY-ST-ZIP	CLEARWATER, FL 33762
TITLE	SD
NAME	NIEDERMEIR, JANET
STREET ADDRESS	3869 107TH AVE. N
CITY-ST-ZIP	CLEARWATER, FL 33762
TITLE	TD
NAME	JUDD, ARLENE
STREET ADDRESS	3940 107TH AVE. NORTH
CITY-ST-ZIP	CLEARWATER, FL 33762
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 3-1-07 727-572-9466
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

RICHARD A. BOWER JR