

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F25726

FILED  
Apr 08, 2011  
Secretary of State

**Entity Name:** STUART LAKESIDE CORPORATION

**Current Principal Place of Business:**

701 S. E. MARTIN LUTHER KING JR BLVD.  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

701 S. E. MARTIN LUTHER KING JR BLVD.  
STUART, FL 34994

**New Mailing Address:**

FEI Number: 59-2170033

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OAKOWSKY, CHARLENE  
701 S.E. MARTIN LUTHER KING JR BLVD.  
STUART, FL 34994 US

**Name and Address of New Registered Agent:**

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:**

Title: PDST  
Name: OAKOWSKY, CHARLENE  
Address: 613 S.E. ASHLEY OAKS WAY  
City-St-Zip: STUART, FL 34997

Title: VP  
Name: OAKOWSKY, CHARLENE  
Address: 613 S.E. ASHLEY OAKS WAY  
City-St-Zip: STUART, FL 34997

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLENE OAKOWSKY

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04/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date