


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2004 8:00 am
Secretary of State

03-11-2004 90016 006 ****61.25

DOCUMENT # N02144 1. Entity Name LAKESIDE VILLAGE "ON LAKE GRIFFIN" HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 3340 E DALE STREET LEESBURG, FL 34788 US				Mailing Address 3340 E DALE STREET LEESBURG, FL 34788 US	
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 59-2392774	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent HANSON, CAROL 3340 E DALE STREET LEESBURG, FL 34788				7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	1VP	<input checked="" type="checkbox"/> Delete	TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GROSS, HENRY		NAME	GROSS, HENRY	
STREET ADDRESS	2440 LAKESIDE DRIVE		STREET ADDRESS	2440 LAKESIDE DRIVE	
CITY-ST-ZIP	LEESBURG, FL 34788		CITY-ST-ZIP	LEESBURG, FL 34788	
TITLE	P	<input type="checkbox"/> Delete	TITLE	VICE PRESIDENT/DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCNEILLY, JAMES		NAME	LEWIS, ROLAND	
STREET ADDRESS	3335 DALE ST		STREET ADDRESS	1220 CITRUS DRIVE	
CITY-ST-ZIP	LEESBURG, FL 34788		CITY-ST-ZIP	LEESBURG, FL 34788	
TITLE	SD	<input type="checkbox"/> Delete	TITLE	TREASURER/DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HANSON, CAROL		NAME	BLACK, CONSTANCE	
STREET ADDRESS	3340 E. DALE		STREET ADDRESS	1251 GROVE DRIVE	
CITY-ST-ZIP	LEESBURG, FL 34788		CITY-ST-ZIP	LEESBURG, FL 34788	
TITLE	D	<input type="checkbox"/> Delete	TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NELSON, MARILYN		NAME	LUNDIN, ROLAND	
STREET ADDRESS	3334 E. DALE		STREET ADDRESS	3322 DEAN STREET	
CITY-ST-ZIP	LEESBURG, FL 34788		CITY-ST-ZIP	LEESBURG, FL 34788	
TITLE	D	<input type="checkbox"/> Delete	TITLE		
NAME	FAEGES, ROBERT		NAME		
STREET ADDRESS	3366 DEAN STREET		STREET ADDRESS		
CITY-ST-ZIP	LEESBURG, FL 34788		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	ASSISTANT TREASURER/DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WELLS, ARTHUR		NAME	WELLS, ARTHUR	
STREET ADDRESS	3323 DALE STREET		STREET ADDRESS	3323 DALE STREET	
CITY-ST-ZIP	LEESBURG, FL 34788		CITY-ST-ZIP	LEESBURG, FL 34788	
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: CAROL HANSON <i>Carol Hanson</i>			FEB 20, 2004		352-787-1056
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>