

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N12927 (2)

1. Corporation Name
LAKESIDE VILLAGE PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business: PO BOX 640780 BEVERLY HILLS FL 34464-0780 US
Mailing Address: P.O. BOX 640780 BEVERLY HILLS FL 34464-0780 US

3. Date Incorporated or Qualified: 01/09/1986
3a. Date of Last Report: 02/05/1996
4. FEI Number: 59-2702100
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State: 28 Zip: 29 Country: 30 CITRUS

9. Name and Address of Current Registered Agent
NELSON, JOHN A
2218 HWY 44 W
INVERNESS FL 34453

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office, its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ DATE: _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	WEAVER, ANN	
STREET ADDRESS	3593 N LAURELWOOD LOOP	
CITY-ST-ZIP	BEVERLY HILLS FL 34465-3310	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	KELBLE, JOSEPH	
STREET ADDRESS	3600 N LAURELWOOD LOOP	
CITY-ST-ZIP	BEVERLY HILLS FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	BECKMAN, ROBERT	
STREET ADDRESS	3585 N. WILLOWTREE POINT	
CITY-ST-ZIP	BEVERLY HILLS FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	KELBLE, CATHERINE E	
STREET ADDRESS	3600 N. LAURELWOOD LOOP	
CITY-ST-ZIP	BEVERLY HILLS FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	KERSHNER, PAUL	
STREET ADDRESS	3590 NORTH WILLOWTREE POINT	
CITY-ST-ZIP	BEVERLY HILLS FL 34465-3310	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	P President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Beverly King
2.3 STREET ADDRESS	3614 N. Laurelwood Loop
2.4 CITY-ST-ZIP	Beverly Hills, FL. 34465
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	SD Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Kenneth Goss
4.3 STREET ADDRESS	3640 N. Laurelwood Loop
4.4 CITY-ST-ZIP	Beverly Hills, Fl. 34465
5.1 TITLE	VD Vice -President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Arthur Lorenson
5.3 STREET ADDRESS	3607 N. Laurelwood Loop
5.4 CITY-ST-ZIP	Beverly Hills, Fl. 34465
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13, as changed, or on any attachment with an address.

SIGNATURE: ROBERT J. BECKMAN, TREASURER
MARCH 11, 1997 746-1758 (352)

CR2E037 (9/96)