

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90137 007 ****61.25

DOCUMENT # N12927

1. Entity Name

LAKESIDE VILLAGE PROPERTY OWNERS' ASSOCIATION, I

Principal Place of Business

Mailing Address

PO BOX 640790
 BEVERLY HILLS FL 34464-0790
 US

P.O. BOX 640790
 BEVERLY HILLS FL 34464-0790
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2702100

Applied For

Not Applicable

Zip

Country

Zip

Country

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

NELSON, JOHN A
2218 HWY 44 W
INVERNESS FL 34453

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	S	<input type="checkbox"/> Delete
NAME	MANSMANN, JOHN	
STREET ADDRESS	3580 N WILLOWTREE PT	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	KING, BEVERLYD	
STREET ADDRESS	3614 N LAUERLWOOD LOOP	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	
TITLE	T	<input type="checkbox"/> Delete
NAME	DIGGS, RICHARD	
STREET ADDRESS	3617 N LONGPINE POINT	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	GOSS, KENNETH	
STREET ADDRESS	3640 N. LAURELWOOD LOOP	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	THOMAS, MARGOT	
STREET ADDRESS	3595 N LONGPINE POINT	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	A. PAUL KERSHNER	
STREET ADDRESS	3560 N. WILLOWTREE PT.	
CITY-ST-ZIP	BEVERLY HILLS, FL 34465	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	ROBERT BECKMAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3585 N. WILLOWTREE PT.	
STREET ADDRESS	BEVERLY HILLS, FL 34465	
CITY-ST-ZIP		
TITLE	EUGENE LEARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3583 N. WILLOWTREE PT	
STREET ADDRESS	BEVERLY HILLS, FL 34465	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Richard N. Diggs
 SIGNATURE

RICHARD N. DIGGS (352)
3/13/00 527-8922

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)