

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

FILED
Mar 27, 1996 08:00 AM
Secretary of State

DOCUMENT # **1036764**

1. Corporation Name
Lakeside Garden Homeowners Assoc.
Principal Place of Business Mailing Address
**212 Lakeside Garden Cir.
Lake Wales, Fl.
33853-9735**

200001762052
-03/29/96--01015--014
*****61.25**

21	2a. Mailing Address	26	212 Lakeside Garden Cir.
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	Lake Wales, Fl.
24	Zip	29	33853-8735
	Country	30	USA

3. Date Incorporated or Qualified	3a. Date of Last Report
Feb. 1990	1-19-95
4. FEI Number	Applied For
59-3016300	Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
Victor Rabberman
252 Lakeside Garden Circle
Lake Wales, Fl. 33853

10. Name and Address of New Registered Agent
81 Name **Elizabeth Badger**
82 Street Address (P.O. Box Number is Not Acceptable) **212 Lakeside Garden Circle**
83
84 City **Lake Wales** FL 85 Zip Code **33853-8735**

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 or 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 **Elizabeth Badger** DATE **2-14-96**

12. OFFICERS AND DIRECTORS

TITLE	Pres.	<input checked="" type="checkbox"/> DELETE
NAME	Robert Hall	Warner Scripps College
STREET ADDRESS	5301 U.S. 29 SO.	
CITY-ST-ZIP	Lake Wales, Fl.	33853
TITLE	Vice Pres.	<input checked="" type="checkbox"/> DELETE
NAME	Earl Van Sipe	
STREET ADDRESS	196 Lakeside Garden Cir.	
CITY-ST-ZIP	Lake Wales, Fl.	33853
TITLE	D. Sect.	<input checked="" type="checkbox"/> DELETE
NAME	Pam Bloomquist	
STREET ADDRESS	100 Lakeside Garden Cir.	
CITY-ST-ZIP	Lake Wales, Fl.	33853
TITLE	D. Treas.	<input checked="" type="checkbox"/> DELETE
NAME	Victor Rabberman	
STREET ADDRESS	252 Lakeside Garden Cir.	
CITY-ST-ZIP	Lake Wales, Fl.	33853
TITLE	D. Board Member	<input checked="" type="checkbox"/> DELETE
NAME	Linda Staley	
STREET ADDRESS	149 Lakeside Garden Cir.	
CITY-ST-ZIP	Lake Wales, Fl.	33853
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D. Pres.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Claudia Henry	
13 STREET ADDRESS	231 Lakeside Garden Cir.	
14 CITY-ST-ZIP	Lake Wales, Fl.	33853
21 TITLE	Vice Pres.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Robert Hashell	
23 STREET ADDRESS	89 Lakeside Garden Cir.	
24 CITY-ST-ZIP	Lake Wales, Fl.	33853
31 TITLE	Sect.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Norma McQueen	
33 STREET ADDRESS	199 Lakeside Garden Cir.	
34 CITY-ST-ZIP	Lake Wales, Fl.	33853
41 TITLE	D. Treas.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	Elizabeth Badger	
43 STREET ADDRESS	212 Lakeside Garden Cir.	
44 CITY-ST-ZIP	Lake Wales, Fl.	33853-8735
51 TITLE	D. Board Member	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	John Holdman	
53 STREET ADDRESS	318 Sunshine Dr.	
54 CITY-ST-ZIP	Lake Wales, Fl.	33853
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed, or on an attachment with an address.

SIGNATURE: **Elizabeth Badger** DATE: **2-14-96**

CR2E037 (12/95)