

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **737688** (2)
1. Corporation Name
LAKESIDE VILLAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 1130 N. LAKE PARKER AVE. LAKELAND FL 33805-4756		Mailing Address 1130 N. LAKE PARKER AVE. LAKELAND FL 33805-4756		3. Date incorporated or Qualified 12/27/1976	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-1804125	
21 Suite, Apt. #, etc.	25	26 Suite, Apt. #, etc.	27	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22 City & State	23	28 City & State	29	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip	25 Country	29 Zip	30 Country	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent MAC CANON, FRANCIS R 1130 N. LAKE PARKER AVE., A-210 LAKELAND FL 33805				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
				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 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 Francis R. Maccanon **FRANCIS R. MACCANON** 1/23/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD <input type="checkbox"/> DELETE	1.1 TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GLOVER, JAMES C	1.2 NAME	BLANTON, VIRGINIA
STREET ADDRESS	1130 N. LAKE PARKER AVE. A-106	1.3 STREET ADDRESS	1130 N. LAKE PARKER AVE. A-302
CITY-ST-ZIP	LAKELAND FL 33805	1.4 CITY-ST-ZIP	LAKELAND, FL., 33805
TITLE	PD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MINISCI, ROBERT J	2.2 NAME	BUCHANAN, DELOISE
STREET ADDRESS	1130 N. LAKE PARKER AVE. B-312	2.3 STREET ADDRESS	1130 N. LAKE PARKER AVE. -A-207
CITY-ST-ZIP	LAKELAND FL 33805	2.4 CITY-ST-ZIP	LAKELAND, FL., 33805
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NAGLE, JOHN J	3.2 NAME	NAGLE, JOHN J.
STREET ADDRESS	1130 N. LAKE PARKER AVE. B-213	3.3 STREET ADDRESS	1130 N. LAKE PARKER AVE. B-213
CITY-ST-ZIP	LAKELAND FL 33805	3.4 CITY-ST-ZIP	Lakeland fl 33805
TITLE	VD <input type="checkbox"/> DELETE	4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUDSON, JEFFERSON B	4.2 NAME	HUDSON, JEFFERSON B
STREET ADDRESS	1130 N. LAKE PARKER AVE. A-120	4.3 STREET ADDRESS	1130 N. LAKE PARKER AVE. -A-310
CITY-ST-ZIP	LAKELAND FL 33805	4.4 CITY-ST-ZIP	LAKELAND, FL., 33805
TITLE	SD <input type="checkbox"/> DELETE	5.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAC CANON, FRANCIS R	5.2 NAME	MAC CANON, FRANCIS R
STREET ADDRESS	1130 N. LAKE PARKER AVE. A-210	5.3 STREET ADDRESS	1130 N. LAKE PARKER AVE. A-210
CITY-ST-ZIP	LAKELAND FL 33805	5.4 CITY-ST-ZIP	LAKELAND, FL., 33805
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PANZICA, ANTHONY B	6.2 NAME	CALDWELL, ROY
STREET ADDRESS	1130 N. LAKE PARKER AVE. B-315	6.3 STREET ADDRESS	1130 N. LAKE PARKER AVE. B-218
CITY-ST-ZIP	LAKELAND FL 33805	6.4 CITY-ST-ZIP	LAKELAND, FL., 33805

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Francis R. Maccanon **FRANCIS R. MACCANON** 1/23/98 (941)688-0899
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0064832

CR2E037 (10/97)