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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 706393

1. Corporation Name
SOUTH PALMWAY-LAKESIDE DRIVE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~107 18TH AVENUE SOUTH~~ 1401	~~107 18TH AVENUE SOUTH~~
LAKE WORTH FL 33460	LAKE WORTH FL 33460
US	US

2. Principal Place of Business 21 1401 South Palmway 22 Suite, Apt. #, etc. 23 City & State: Lake Worth, Florida 24 Zip: 33460 25 Country: US	2a. Mailing Address 26 1401 South Palmway 27 Suite, Apt. #, etc. 28 City & State: Lake Worth, Florida 29 Zip: 33460 30 Country: US	3. Date Incorporated or Qualifed: 11/08/1963 4. FEI Number: 59-2163275 ☐ Applied For ☑ Not Applicable 5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

Delete
~~ANDERSEN, LUCILLE M.~~
~~107 18TH AVENUE SOUTH~~
~~LAKE WORTH FL 33460~~

10. Name and Address of New Registered Agent

81 Name: Patricia C. Clager
82 Street Address (P.O. Box Number is Not Acceptable): 1401 South Palmway
83
84 City: Lake Worth FL 85 Zip Code: 33460

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: Patricia C. Clager — April 27, 1999
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ANDERSEN, LUCILLE M. 107 18THAVENUE SOUTH LAKE WORTH FL	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	V Balch, Pat 512 South Palmway Lake Worth, Florida 33460	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BOWER, KEN 1100 S. LAKESIDE DRIVE LAKE WORTH, FL 00000	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Brower, Ken	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MORRISSETTE, DAVE 601 S PALMWAY LAKE WORTH, FL 00000 33460	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4. CITY-ST-ZIP	S Chapnick, Sharon 1216 South Lakeside Drive Lake Worth, Florida 33460	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CLAGER, PAT 1401 S. PALMWAY LAKE WORTH FL 33460	☐ DELETE	4.1 TITLE / 4. 2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	T	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	S Joanne Kelly 1202 South Lakeside Drive Lake Worth, Florida 33460	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	P Philip Modenos 1431 South Palmway Lake Worth, Florida 33460	☐ Change ☒ Addition

CR2E037 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: Patricia C. Clager SECRETARY/TREASURER — April 27, 1999 — (561) 586-3590
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #