

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714677

**FILED**  
**Mar 28, 2013**  
**Secretary of State**  
**CC2954206808**

**Entity Name:** LAKESIDE POINT APARTMENT NO. 8 ASSOCIATION, INC., A CONDOMINIUM ASSOCIATION

**Current Principal Place of Business:**

2304 LAKE OSBORNE DRIVE  
LAKE WORTH, FL 33461

**Current Mailing Address:**

2304 LAKE OSBORNE DRIVE  
LAKE WORTH, FL 33461

**FEI Number: 59-2381378**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

EGNER, CAMEY PRES  
2304 LAKE OSBORNE DR  
APT 5  
LAKE WORTH, FL 33461 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title S/D  
Name ROTH, JOAN  
Address 2304 LAKE OSBORNE DR  
City-State-Zip: LAKE WORTH FL 33461

Title T/D  
Name WATLING, DOROTHY  
Address 2304 LAKE OSBORNE DRIVE  
City-State-Zip: LAKE WORTH FL 33461

Title D  
Name EDWARDS, DONNA  
Address 2304 LAKE OSBORNE DR  
City-State-Zip: LAKE WORTH FL 33461

Title D/VP  
Name GRIMES, IRENE  
Address 2304 LAKE OSBORNE DR  
City-State-Zip: LAKE WORTH FL 33461

Title DP  
Name EGNER, CAMEY  
Address 2304 LAKE OSBORNE DR.  
City-State-Zip: LAKE WORTH FL 33461

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: CAMEY EGNER**

**PRESIDENT**

**03/28/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date