

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714677

FILED
Jan 19, 2016
Secretary of State
CC9844003203

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:

PO BOX 368
PALM BEACH, FL 33480 US

FEI Number: 59-2381378

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBINSON, CARALYN P.
224 DATURA STREET
STE. 807
WEST PALM BEACH, FL 33401 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: CARALYN P. ROBINSON

01/19/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title TREASURER
Name HEINONEN, ARJA
Address 2304 LAKE OSBORNE DR.
City-State-Zip: LAKE WORTH FL 33461

Title ASSISTANT SECRETARY
Name ROBINSON, CARALYN P
Address PO BOX 368
City-State-Zip: PALM BEACH FL 33480

Title VP
Name ILLI, AARO
Address 2304 LAKE OSBORNE DRIVE
City-State-Zip: LAKE WORTH FL 33461

Title SECRETARY
Name MURUMAA, MAIE
Address 2304 LAKE OSBORNE DRIVE
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR
Name MALONE, WILLIAM
Address 2304 LAKE OSBORNE DRIVE
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: CARALYN ROBINSON

ASSISTANT SECRETARY 01/19/2016

Electronic Signature of Signing Officer/Director Detail

Date