

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718703

FILED
Apr 02, 2018
Secretary of State
CC3009555001

Entity Name: CONDOMINIUM ASSOCIATION OF LAKESIDE VILLAGE, INC.

Current Principal Place of Business:

GRS MANAGEMENT ASSOC.INC
3900 WOODLAKE BVD SUITE 309
LAKE WORTH, FL 33463

Current Mailing Address:

LAKESIDE VILLAGE
500 LORI DRIVE
PALM SPRINGS, FL 33461

FEI Number: 59-1678430

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 N COMMERCE PKWY
WESTON, FL 33326 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 SECRETARY
Name TORRES, RAYMOND
Address 500 LORI DRIVE
City-State-Zip: PALM SPRINGS FL 33461

Title DIRECTOR
Name SCIANDRA, ANGELO
Address LAKESIDE VILLAGE
500 LORI DRIVE
City-State-Zip: PALM SPRINGS FL 33461

Title TREASURER
Name SHEFFER, BEVERLY
Address LAKESIDE VILLAGE
500 LORI DRIVE
City-State-Zip: PALM SPRINGS FL 33461

Title PRESIDENT
Name FREDERICK, DON
Address LAKESIDE VILLAGE
500 LORI DRIVE
City-State-Zip: PALM SPRINGS FL 33461

Title DIRECTOR
Name BLOODWORTH, AUDREY
Address LAKESIDE VILLAGE
500 LORI DRIVE
City-State-Zip: PALM SPRINGS FL 33461

Title V-PRESIDENT
Name HOWELL, ROBERT
Address LAKESIDE VILLAGE
500 LORI DRIVE
City-State-Zip: PALM SPRINGS FL 33461

Title DIRECTOR
Name MARIO, GIAMMICHELE
Address LAKESIDE VILLAGE
500 LORI DRIVE
City-State-Zip: PALM SPRINGS FL 33461

Title DIRECTOR
Name JOSEPH, MORABITO
Address LAKESIDE VILLAGE
500 LORI DRIVE
City-State-Zip: PALM SPRINGS FL 33461

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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: ROBERT HOWELL

V-PRESIDENT

04/02/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PAVONE, PAUL
Address LAKESIDE VILLAGE
 500 LORI DRIVE
City-State-Zip: PALM SPRINGS FL 33461