

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718703

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

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

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

Title DIRECTOR
Name PICORINI, RON
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: JACKIE EFTHEMES**SECRETARY****05/03/2017**

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