

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757448

Entity Name: LAKESIDE VILLAGE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**9301 TROWBRIDGE COURT
NEW PORT RICHEY , FL 34655**Current Mailing Address:**9301 TROWBRIDGE COURT
NEW PORT RICHEY , FL 34655 US**FEI Number:** 59-2172778**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BRYANT, GAIL
9306 TROWBRIDGE COURT
NEW PORT RICHEY , FL 34655 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:** GAIL BRYANT

02/09/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name BRYANT, ANITA GAIL
Address 9306 TROWBRIDGE COURT
City-State-Zip: NEW PORT RICHEY FL 34655

Title VP, DIRECTOR
Name MURPHY, WILLIAM
Address 4966 GRIST MILL CIRCLE
City-State-Zip: NEW PORT RICHEY FL 34655

Title SECRETARY, DIRECTOR
Name CARLSON, ERIC
Address 4933 GRIST MILL CIRCLE
City-State-Zip: NEW PORT RICHEY FL 34655

Title TREASURER, DIRECTOR
Name MCINTYRE, SUE
Address 9306 TROWBRIDGE COURT
City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR
Name SCHIFFER, RITA
Address 9327 WHITSTONE COURT
City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR
Name LUSZCZ, GEORGE
Address 9309 TROWBRIDGE COURT
City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR
Name SELTER, JUDY
Address 4925 GRIST MILL CIRCLE
City-State-Zip: NEW PORT RICHEY FL 34655

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: ANITA GAIL BRYANT

PRESIDENT

02/09/2024

Electronic Signature of Signing Officer/Director Detail

Date