

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02144

Entity Name: LAKESIDE VILLAGE "ON LAKE GRIFFIN" HOMEOWNERS' ASSOCIATION, INC.**FILED**
Feb 12, 2019
Secretary of State
4165069179CC**Current Principal Place of Business:**529 VERSAILLES DRIVE
SUITE 103
MAITLAND, FL 32751**Current Mailing Address:**529 VERSAILLES DRIVE
SUITE 103
MAITLAND, FL 32751 US**FEI Number: 59-2392774****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LEE JAY COLLING & ASSOC., P.A.
529 VERSAILLES DRIVE
SUITE 103
MAITLAND, FL 32751 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 | P |
| Name | MCNEILLY, JAMES |
| Address | 3335 E. DALE STREET |
| City-State-Zip: | LEESBURG FL 34788 |

| | |
|-----------------|-------------------|
| Title | VP |
| Name | DOBIE, RICHARD |
| Address | 2181 SUNSET DRIVE |
| City-State-Zip: | LEESBURG FL 34788 |

| | |
|-----------------|---------------------|
| Title | S |
| Name | OBERLIN, NEYSA |
| Address | 2521 LAKESIDE DRIVE |
| City-State-Zip: | LEESBURG FL 34788 |

| | |
|-----------------|-------------------|
| Title | T |
| Name | BLACK, CONSTANCE |
| Address | 1251 GROVE DRIVE |
| City-State-Zip: | LEESBURG FL 34788 |

| | |
|-----------------|---------------------|
| Title | T-2 |
| Name | CHAMPAGNE, ALICE |
| Address | 2321 LAKESIDE DRIVE |
| City-State-Zip: | LEESBURG FL 34788 |

| | |
|-----------------|-------------------|
| Title | DIRECTOR |
| Name | STONER, MICHAEL |
| Address | 1241 GROVE DRIVE |
| City-State-Zip: | LEESBURG FL 34788 |

| | |
|-----------------|-------------------|
| Title | DIRECTOR |
| Name | SHANNON, DAVID |
| Address | 1240 CITRUS DRIVE |
| City-State-Zip: | LEESBURG FL 34788 |

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: CONSTANCE BLACK**TREASURER****02/12/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date