

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000004825

**Entity Name:** THE TOWNS AT LAKESIDE ASSOCIATION, INC.

**Current Principal Place of Business:**

321 INTERSTATE BLVD  
SARASOTA, FL 34240

**Current Mailing Address:**

C/O SUNVAST PROPERTIES, INC.  
321 INTERSTATE BLVD  
SARASOTA, FL 34240

**FEI Number:** 20-3344284

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SUNVAST PROPERTIES, INC.  
321 INTERSTATE BLVD  
SARASOTA, FL 34240 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            PRESIDENT  
Name            PERRY, RONALD  
Address        2278 MULBERRY LANE  
City-State-Zip: NORT PORT FL 34289

Title            SECRETARY  
Name            MONTI, RICHARD L  
Address        14 EASTVIEW AVENUE  
City-State-Zip: BILLERICA MA 01821

Title            VP  
Name            HIGH, DONALD  
Address        1068 JONAH DRIVE  
City-State-Zip: NORTH PORT FL 34289

Title            TREASURER  
Name            WILLS, GREGORY  
Address        1198 JONAH DRIVE  
City-State-Zip: NORTH PORT FL 34289

*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:** RONALD PERRY

**PRESIDENT**

**04/14/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date