### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12927

Entity Name: LAKESIDE VILLAGE PROPERTY OWNERS' ASSOCIATION, INC.

**FILED** Jan 19, 2015 **Secretary of State** CC1352399391

# **Current Principal Place of Business:**

3620 N LAURELWOOD LOOP BEVERLY HILLS. FL 34465

## **Current Mailing Address:**

PO BOX 640790

BEVERLY HILLS. FL 34464 US

FEI Number: 59-2702100 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LYN, DENISE 307 N APOPKA AVENUE INVERNESS, FL 34450 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 Title

LOMBARDI, BRIDGET B DEAROLF, ROBERT Name Name

Address 3573 N WILLOWTREE POINT Address 3634 N LONGPINE POINT

City-State-Zip: BEVERLY HILLS FL 34465 BEVERLY HILLS FL 34465 City-State-Zip:

Title DIRECTOR Title **PRESIDENT** 

Name ISLEIB, DOUGLAS M Name JERVIS, RALPH

Address 3699 N LAURELWOOD LOOP Address 3620 N LAURELWOOD LOOP BEVERLY HILLS FL 34465 City-State-Zip: BEVERLY HILLS FL 34465 City-State-Zip:

Title DIRECTOR **SECRETARY** Title

Name BACKHAUS, FRED PIPER, DORTHY Name

Address 3624 N LAURELWOOD LOOP 3639 N LAKESIDE VILLAGE DRIVE Address BEVERLY HILLS FL 34465

City-State-Zip: City-State-Zip: BEVERLY HILLS FL 34465

Title DIRECTOR

LIEBMAN, JONATHAN Name 3555 N WILLOWTREE PT Address BEVERLY HILLS FL 34465 City-State-Zip:

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.

01/19/2015 SIGNATURE: BRIDGET B. LOMBARDI TREASURER