2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT	-

#### DOCUMENT# N12927

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

## Current Principal Place of Business:

2102 SW 20TH PLACE SUITE 402 OCALA, FL 34471

### **Current Mailing Address:**

2102 SW 20TH PLACE SUITE 402 OCALA, FL 34471 US

#### FEI Number: 59-2702100

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

BOSSHARDT PROPERTY MANAGEMENT 2102 SW 20TH PLACE SUITE 402 OCALA, FL 34471 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:	GARRY GRIFFIN			03/14/2016
	Electronic Signature of Registered Agent			Date
Officer/Direct	tor Detail :			
Title I	DIRECTOR	Title	VP	
Name I	ISLEIB, DOUGLAS M	Name	LIEBMAN, JONATHAN	
	2102 SW 20TH PLACE SUITE 402	Address	2102 SW 20TH PLACE SUITE 402	
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471	
Title	PRESIDENT	Title	SECRETARY	
Name I	FONTAINE, ORUGENE	Name	NEIFFER, ALICE	
	2102 SW 20TH PLACE SUITE 402	Address	2102 SW 20TH PLACE SUITE 402	
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471	
Title	DIRECTOR	Title	DIRECTOR	
Name	CONSIGLIO, MARION	Name	CODY, KATHLEEN	
	2102 SW 20TH PLACE SUITE 402	Address	2102 SW 20TH PLACE SUITE 402	
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471	

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.

PRESIDENT

#### SIGNATURE: ORUGENE FONTAINE

Electronic Signature of Signing Officer/Director Detail

# FILED Mar 14, 2016 Secretary of State CC1655968955

Certificate of Status Desired: No

03/14/2016 Date