2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12927

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

FILED Mar 29, 2019 **Secretary of State** 9735059564CC

Current Principal Place of Business:

2541 N RESTON TERRACE HERNANDO. FL 34442

Current Mailing Address:

2541 N RESTON TERRACE HERNANDO. FL 34442 US

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

Name and Address of Current Registered Agent:

VILLAGES SERVICES COOPERATIVE, INC. 2541 N RESTON TERRACE HERNANDO, FL 34442 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: GERALYN BOND 03/29/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title **PRESIDENT**

ISLEIB, DOUGLAS M Name Name LIEBMAN, JONATHAN 2541 N RESTON TERRACE Address 2541 N RESTON TERRACE Address

City-State-Zip: HERNANDO FL 34442 City-State-Zip: HERNANDO FL 34442

VΡ Title Title SECRETARY, TREASURER

Name BOCCUTI, LEWIS Name HANE, DONNA J

Address 2541 N RESTON TERRACE Address 2541 N RESTON TERRACE HERNANDO FL 34442 City-State-Zip: HERNANDO FL 34442 City-State-Zip:

Title DIRECTOR Title **DIRECTOR**

Name ARSENAULT, MARY ELLEN Name CISKOWSKI, JANET Address 2541 N RESTON TERRACE 2541 N RESTON TERRACE Address City-State-Zip: HERNANDO FL 34442

Title DIRECTOR

City-State-Zip:

ROSALES, DOLORES Name

2541 N RESTON TERRACE Address City-State-Zip: HERNANDO FL 34442

HERNANDO FL 34442

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.

03/29/2019 SIGNATURE: DONNA J HANE **SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date