

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12927

**Entity Name:** LAKESIDE VILLAGE PROPERTY OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**3623 N LONGPINE POINT  
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	DT
Name	LOMBARDI, BRIDGET B
Address	3634 N LONGPINE POINT
City-State-Zip:	BEVERLY HILLS FL 34465

Title	D
Name	DEAROLF, ROBERT
Address	3573 N WILLOWTREE POINT
City-State-Zip:	BEVERLY HILLS FL 34465

Title	DP
Name	TROMETER, ROBERT
Address	3623 N LONGPINE POINT
City-State-Zip:	BEVERLY HILLS FL 34465

Title	DS
Name	MACDOUGALL, BARBARA
Address	3577 N MAPLETREE POINT
City-State-Zip:	BEVERLY HILLS FL 34465

Title	DVP
Name	COSTANZO, JOHN
Address	3580 N LONGPINE POINT
City-State-Zip:	BEVERLY HILLS FL 34465

Title	D
Name	MARTINO, BEN
Address	3710 N LAKESIDE VILLAGE DRIVE
City-State-Zip:	BEVERLY HILLS FL 34465

*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: ROBERT R. TROMETER****PRESIDENT****01/25/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date