FEI Number: 59-2891652 Name and Address of Current Registered Agent:			Certificate of Status Desired: No	
6454 RIDO PORT RIC	MARYANN iE ROAD HEY, FL 34668 US named entity submits this statement for the purp	ose of changing its registered office or	registered agent or both in the St	ate of Florida
SIGNAT	URE: MARYANN SYRASKI			06/23/2021
	Electronic Signature of Registered	d Agent		Date
Officer/I	Director Detail :			
Title	DIRECTOR	Title	PRESIDENT	

2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N22255

Entity Name: LAKESIDE VILLAGE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

CANNAVARO, LORI

PORT RICHEY FL 34673

BERMUDEZ, CARMEN

PORT RICHEY FL 34673

KEMELIOTIS, MICHAEL

PO BOX 1407

SECRETARY

PO BOX 1407

DIRECTOR

PO BOX 1407 City-State-Zip: PORT RICHEY FL 34673

6454 RIDGE ROAD PORT RICHEY, FL 34668

Name

Title

Title

Name

Address

Name

Address

Address

City-State-Zip:

City-State-Zip:

Current Mailing Address:

PO BOX 1407 PORT RICHEY, FL 34673 US

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: CANNAVARO, LORI

DIRECTOR

06/23/2021

Electronic Signature of Signing Officer/Director Detail

FILED Jun 23, 2021 Secretary of State 0742821034CC

Name

Title

Name

Address

City-State-Zip:

Address City-State-Zip: BOYCE, JERRY PO BOX 1407

TREASURER

PO BOX 1407

LAMARCH, LEO

PORT RICHEY FL 34673

PORT RICHEY FL 34673

Date