

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31861

**Entity Name:** LAKESIDE LAKE HOMES NEIGHBORHOOD ASSOCIATION, INC.

**FILED**  
**Jan 09, 2015**  
**Secretary of State**  
**CC9306529110**

**Current Principal Place of Business:**

C/O LAKESIDE OF NAPLES  
7600 AIRPORT ROAD N  
NAPLES, FL 34109

**Current Mailing Address:**

C/O LAKESIDE OF NAPLES  
7600 AIRPORT ROAD N  
NAPLES, FL 34109 US

**FEI Number: 65-0127431**

**Certificate of Status Desired: No**

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

LAKESIDE OF NAPLES  
7600 AIRPORT ROAD N  
NAPLES, FL 34109 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: CRAIG CASTLE**

**01/09/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HALL, JON K  
Address 2708 SAILORS WAY  
City-State-Zip: NAPLES FL 34109

Title VP  
Name GUTSHALL, FRED  
Address 2632 SAILORS WAY  
City-State-Zip: NAPLES FL 34109

Title ST  
Name ARDEN, CAROLE  
Address 2716 SAILORS WAY  
City-State-Zip: NAPLES FL 34109

Title DIRECTOR  
Name DAVID, SHIRLEY  
Address 2726 SAILORS WAY  
City-State-Zip: NAPLES FL 34109

Title DIRECTOR  
Name SARISKY, JOAN  
Address 2628 SAILORS WAY  
City-State-Zip: NAPLES FL 34109

*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: JON HALL**

**PRESIDENT**

**01/09/2015**

Electronic Signature of Signing Officer/Director Detail

Date