

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004566

Entity Name: LAKESIDE AT CREEKWOOD ASSOCIATION, INC.**Current Principal Place of Business:**5109 76TH STREET EAST
BRADENTON, FL 34203**Current Mailing Address:**4831 77TH ST E
BRADENTON, FL 34203 US**FEI Number: 59-3317823****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SOUSA, DUANE
5109 76TH ST EAST
BRADENTON, FL 34203 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	X	Title	DIRECTOR
Name	SOUSA, DUANE	Name	BOURQUIN, KAREN
Address	5109 76TH ST EAST.	Address	7638 49TH AVENUE EAST
City-State-Zip:	BRADENTON FL 34203	City-State-Zip:	BRADENTON FL 34203
Title	DIRECTOR	Title	VP
Name	RAISIGEL, SALLY	Name	FOX, MIKE
Address	7301 50TH TERR. E	Address	7307 52ND DR E
City-State-Zip:	BRADENTON FL 34203	City-State-Zip:	BRADENTON FL 34203
Title	SECRETARY	Title	TREASURER
Name	GIRLUS, JOHN	Name	TSCHIGGFRIE, MICHAEL
Address	4821 76TH CT.E.	Address	4831 77TH ST. E.
City-State-Zip:	BRADENTON FL 34203	City-State-Zip:	BRADENTON FL 34203
Title	PRESIDENT		
Name	LETO, RICHARD		
Address	7312 49TH AVE E		
City-State-Zip:	BRADENTON FL 34203		

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: MICHAEL TSCHIGGFRIE**TREASURER****04/12/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date