

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000050416

Entity Name: LAKESIDE VILLAGE PARTNERS, INC.**Current Principal Place of Business:**211 N. RIDGEWOOD AVENUE
SUITE 300
DAYTONA BEACH, FL 32114**Current Mailing Address:**211 N. RIDGEWOOD AVENUE
SUITE 300
DAYTONA BEACH, FL 32114 US**FEI Number:** 02-0719080**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SAXON, BERNICE S. ESQ.
201 E. KENNEDY BOULEVARD
SUITE 600
TAMPA, FL 33602 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:** BERNICE S. SAXON

04/27/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	DANIELS, KELVIN J
Address	211 N. RIDGEWOOD AVENUE SUITE 300
City-State-Zip:	DAYTONA BEACH FL 32114

Title	DIRECTOR
Name	BROWN-CRAWFORD, KIM
Address	211 N. RIDGEWOOD AVENUE SUITE 300
City-State-Zip:	DAYTONA BEACH FL 32114

Title	DIRECTOR
Name	JASS, SALLY
Address	211 N. RIDGEWOOD AVENUE SUITE 300
City-State-Zip:	DAYTONA BEACH FL 32114

Title	DIRECTOR
Name	JAMISON, IRMA DR.
Address	211 N. RIDGEWOOD AVENUE SUITE 300
City-State-Zip:	DAYTONA BEACH FL 32114

Title	PRESIDENT, SECRETARY
Name	WOODYARD, CHARLES
Address	211 N. RIDGEWOOD AVENUE SUITE 300
City-State-Zip:	DAYTONA BEACH FL 32114

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES WOODYARD

PRESIDENT

04/27/2023

Electronic Signature of Signing Officer/Director Detail

Date