

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000013244

Entity Name: LAKESIDE TERRACE WHHA PARTNERS, INC.**Current Principal Place of Business:**2653 AVENUE C S.W.
WINTER HAVEN, FL 33880**Current Mailing Address:**2653 AVENUE C S.W.
WINTER HAVEN, FL 33880**FEI Number:** 20-8089245**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REED MAWHINNEY & LINK, PLLC
1611 HARDEN BLVD.
LAKELAND, FL 33803 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:** ANDREW M REED

02/07/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D, VICE-CHAIR
Name HICKS, BREEZI
Address 2653 AVENUE C S.W.
City-State-Zip: WINTER HAVEN FL 33880

Title D
Name HOGAN, JAMES
Address 2653 AVENUE C S.W.
City-State-Zip: WINTER HAVEN FL 33880

Title D
Name HUDSON, JIMMIE LEE
Address 2653 AVENUE C S.W.
City-State-Zip: WINTER HAVEN FL 33880

Title D
Name HUDSON, JUDY
Address 2653 AVENUE C S.W.
City-State-Zip: WINTER HAVEN FL 33880

Title S
Name JONES WATKINS, LISA
Address 2653 AVENUE C S.W.
City-State-Zip: WINTER HAVEN FL 33880

Title DIRECTOR, CHAIR
Name THOME, MURIEL
Address 2653 AVENUE C S.W.
City-State-Zip: WINTER HAVEN FL 33880

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: LISA JONES WATKINS**SECRETARY**

02/07/2019

Electronic Signature of Signing Officer/Director Detail

Date