#### 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 01/20/2020

MGRM

SIGNATURE: JOHN P MCCARTHY

Electronic Signature of Signing Authorized Person(s) Detail

#### Electronic Signature of Registered Agent

City-State-Zip: LAKE WALES FL 33853

Authorized Person(s) Detail :			
Title	MGRM	Title	MGRM
Name	MCCARTHY, JOHN P	Name	MCCARTHY, KATHERINE A
Address	2519 BORDEAUX WAY	Address	2519 BORDEAUX WAY
City-State-Zip:	LUTZ FL 33559	City-State-Zip:	LUTZ FL 33559
Title	MGRM		
Name	KERNON, ROBERT J		
Address	220 LAKESHORE DR N		

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

MCCARTHY, JOHN P 2519 BORDEAUX WAY

2519 BORDEAUX WAY

# 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L05000016729

Entity Name: LAKESIDE GARDENS MOBILE HOME PARK, LLC

## **Current Principal Place of Business:**

13897 U S HIGHWAY 27 LAKE WALES. FL 33859

## **Current Mailing Address:**

LUTZ. FL 33559

## FEI Number: 20-2709305

LUTZ, FL 33559 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:

Jan 20, 2020 Secretary of State 3712452768CC

Date

Certificate of Status Desired: No

FILED

Date