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PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1, Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortharb

Secretary of State
DIVISION OF CORPORATIONS

/ENT # 592009

(5)

FILED
May 01 1998 8:00am
Secretary of State

LAKESIDE CORP. Principal Place of Business Mailing Address **SOI MANDALAY AVE** 501 MANDALAY AVE P.O. BOX 3488 P.O. BOX 3488 **CLEARWATER BCH FL 34630-5488** CLEARWATER BCH FL 34630-5488 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/02/1978 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-1340867 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RAUSCH, MICHAEL C 501 MANDALAY AVE-OFFICE Street Address (P.O. Box Number is Not Acceptable) CLEARWATER BEACH FL 33515 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's gnature required whon reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE President Change K Addition **BOURDIN, NOEL** Rausch, Michael C. NAME 1.2 NAME **501 MANDALAY AVENUE** 501 Mandalay Avenue STREET ADDRESS 1.3 STREET ADDRESS CLEARWATER FL Clearwater, FL 33767 CITY-ST-7IP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change ☐ Addition **SCHREIBER**, KATHERINE 2.2 NAME **501 MANDALAY AVE** STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER BCH FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ☐ Addition **DUBROW, ELI B.** NAME 3.2 NAME 501 MADALAY AVENUE STREET ADDRESS 3.3 STREET ADDRESS CLEARWATER BEACH FL CITY-ST-ZIP 3 4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition SHAW-KENNEDY, B. JOHN NAME 4. 2 NAME **5**01 MANDALAY AVE STREET ADDRESS 4.3 STREET ADDRESS **CLEARWATER BCH FL** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE XX Change Addition NAME BAKER, BARBARA 5.2 NAME Cooper, Barbara STREET ADDRESS **501 MANDALAY AVE** 5.3 STREET ADDRESS **CLEARWATER BCH FL** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE ☐ Addition 6.1 TITLE Change NAME LONIS, LARRY 6.2 NAME **501 MANDALAY AVE** STREET ADDRESS **6.3 STREET ADDRESS CLEARWATER BCH FL** 6.4 City-St-ZiP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the
