

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2004 8:00 am
Secretary of State

01-14-2004 90002 046 ****61.25

DOCUMENT # 714379	
1. Entity Name LIDO HARBOUR SOUTH, INC.	

Principal Place of Business 2100 BENJAMIN FRANKLIN DRIVE SARASOTA, FL 34236	Mailing Address 2100 BENJAMIN FRANKLIN DRIVE SARASOTA, FL 34236
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

94002001

01072004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-1282997	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	
WILSON, DONALD G. 2110 BEN FRANKLIN DRIVE SARASOTA, FL 34236	

7. Name and Address of New Registered Agent	
Name OSCAR ARNAY	
Street Address (P.O. Box Number is Not Acceptable) 2110 BEN FRANKLIN DR	
APT# S-107	
City SARASOTA,	FL Zip Code 34236

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *X Oscar Arnay* **O.P. ARNAY, TREASURER** DATE **1/9/2004**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ARNAY, OSCAR 2100 BEN FRANKLIN DR SARASOTA, FL 34236 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DENNISON, GENE 2100 BEN FRANKLIN DRIVE SARASOTA, FL 34236 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOWEN, RUTH 2100 BEN FRANKLIN DR SARASOTA, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT BRAINARD, BARBARA 2110 BEN FRANKLIN DR SARASOTA, FL 34236 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAJJAR, JOHN 7715 FAIRWAY WOODS DRIVE SARASOTA, FL 34238 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SHAW, DALLAS 2110 BEN FRANKLIN DR SARASOTA, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X Oscar Arnay* **O.P. ARNAY, TREASURER** DATE **1/9/2004**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR