

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -5 PM 2:41

DOCUMENT # 754019 (8)

1. Corporation Name

**LAKE SHORE VILLAGE SOUTH CONDOMINIUM ASSOCIATION,
INC.**

Principal Place of Business

Mailing Address

**2055 WOOD ST., STE 202
342786165
SARASOTA FL 34237-7920**

**2055 WOOD ST., STE 202
342786165
SARASOTA FL 34237-7920**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1980

3a. Date of Last Report

04/21/1994

4. FEI Number

59-2177675

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PROPERTY AND ACCOUNTING MGR. INC.
2055 WOOD ST., STE. 202
SARASOTA FL 34237**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VD
NAME	FERGUSON, JOHN
STREET ADDRESS	6103 WILSHIRE CIRCLE, #15
CITY - ST - ZIP	SARASOTA FL
TITLE	TD
NAME	IVES, HERBERT
STREET ADDRESS	3895 WILSHIRE CIRCLE, #24
CITY - ST - ZIP	SARASOTA FL
TITLE	PD
NAME	HART, RICHARD
STREET ADDRESS	6110 WILSHIRE CIRCLE #7
CITY - ST - ZIP	SARASOTA FL
TITLE	SD
NAME	MONCELLI, LILLIAN
STREET ADDRESS	3857 WILSHIRE DR. #10
CITY - ST - ZIP	SARASOTA FL
TITLE	D
NAME	BAHM, HAROLD
STREET ADDRESS	3840 WILSHIRE CR #32
CITY - ST - ZIP	SARASOTA FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	TD	☐ Change ☐ Addition
1.2 NAME	Ferguson, John	
1.3 STREET ADDRESS	6103 Wilshire Circle, #15	
1.4 CITY - ST - ZIP	Sarasota, FL 34238	
2.1 TITLE	D	☐ Change ☒ Addition
2.2 NAME	Karp, Daniel	
2.3 STREET ADDRESS	6143 Wilschire Circle, #19	
2.4 CITY - ST - ZIP	Sarasota, FL 34238	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	VD	☒ Change ☐ Addition
5.2 NAME	Bahm, Harold	
5.3 STREET ADDRESS	3840 Wilshire Circle, #32	
5.4 CITY - ST - ZIP	Sarasota, FL 34238	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or the receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF MONITORING OFFICER OR DIRECTOR

3/29/95

Date

(Typed Name)