

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90101 002 ****61.25

DOCUMENT # 754019 1. Entity Name LAKE SHORE VILLAGE SOUTH CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 4983 RINGWOOD MEADOW SARASOTA, FL 34235			Mailing Address 4983 RINGWOOD MEADOW SARASOTA, FL 34235		
2. Principal Place of Business 5037 Ringwood Meadow Suite, Apt. #, etc. B		3. Mailing Address 5037 Ringwood Meadow Suite, Apt. #, etc. B			
City & State		City & State		01072005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 59-2177675	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent PAMI MANAGEMENT INC 4983 RINGWOOD MEADOW SARASOTA, FL 34235			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARRINO, WILLIAM 6133 WILSHIRE CIR. #18 SARASOTA, FL 34238	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FEENEY, ALICE 3880 WILSHIRE CIR. #25 SARASOTA, FL 34238	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, WARREN 3875 WILSHIRE CIRCLE #22 SARASOTA, FL 34238	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRAHAM, ARTHUR 3860 WILSHIRE CENTER #30 SARASOTA, FL 34238	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BAHM, HAROLD 3840 WILSHIRE CR #32 SARASOTA, FL	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Wilson, Marilyn 3896 Wilshire Drive #11 Sarasota, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASSIN, RICHARD 3865 WILSHIRE CIR. #21 SARASOTA, FL 34238	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Cassin, Richard 3865 Wilshire Cir. #21 Sarasota, FL 34238
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: _____ <i>Alice J. Feeney</i> 4/15/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					