

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 754731

**FILED**  
**Jan 30, 2010**  
**Secretary of State**

**Entity Name:** LINKSIDE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5630 MATANZAS DR.  
SEBRING, FL 33872 US

**New Principal Place of Business:**

**Current Mailing Address:**

5630 MATANZAS DR.  
SEBRING, FL 33872 US

**New Mailing Address:**

**FEI Number:** 59-2251086

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMPSON, EARL  
5630 MATANZAS DR.  
SEBRING, FL 33872 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: THOMPSON, EARL  
Address: 404 TWIN OAKS LN  
City-St-Zip: JACKSONVILLE, FL 32259

Title: SD  
Name: TITUS, THOMAS  
Address: 11513 LAKE RIDGE DR  
City-St-Zip: TAMPA, FL 33618

Title: TD  
Name: MORRIS, TERRILL  
Address: 4410 LAKEVIEW DR  
City-St-Zip: SEBRING, FL 33870

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 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** EARL THOMPSON

PD

01/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date