

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 756326 (5)

1. Corporation Name

121 SOUTH LAKESIDE APTS., INC.



Principal Place of Business

Mailing Address

121 SOUTH LAKESIDE DR.
LAKE WORTH FL 33460

121 SOUTH LAKESIDE DR.
LAKE WORTH FL 33460

3. Date Incorporated or Qualified

02/12/1981

3a. Date of Last Report

05/30/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 3812 CHALLENGER CIRCLE

22 City & State

27 c/o A.M. ALMEIDA

23 Zip

Country

28 Zip

29 33462

Country

30 PALM BEACH

4. FEI Number

65-0538860

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALMEIDA, ARMAND M
121 SOUTH LAKESIDE DR.
LAKE WORTH FL 33460

New address
for Registered agent

81 Name

ARMAND M. ALMEIDA

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

3812 CHALLENGER CIRCLE

83

84 City

LANTANA,

FLA. FL

85 Zip Code

33462

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Armand M. Almeida

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

1/31/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PTD

☐ DELETE

NAME

ALMEIDA, ARMAND P, MD

STREET ADDRESS

121 SOUTH LAKESIDE DRIVE #1

CITY - ST - ZIP

LAKE WORTH FL 33460

3812 CHALLENGER CIRCLE

LANTANA, FLA. 33462

TITLE

SD

☒ DELETE

NAME

SHEETZ, TIMOTHY

STREET ADDRESS

121 SOUTH LAKESIDE DRIVE #2

CITY - ST - ZIP

LAKE WORTH FL 33460

TITLE

D

☒ DELETE

NAME

YOUNG, ARTHUR

STREET ADDRESS

220 SOUTH PALM WAY

CITY - ST - ZIP

LAKE WORTH FL 33460

TITLE

D

☐ DELETE

NAME

COOK, JAMES C

STREET ADDRESS

3120 LAKE OSBORNE DR., NO. 201

CITY - ST - ZIP

LAKE WORTH FL 33461

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.1 TITLE

☐ Change

☐ Addition

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change

☒ Addition

2.2 NAME

FRANK GREENE S

2.3 STREET ADDRESS

121 S. LAKESIDE DR

2.4 CITY - ST - ZIP

LAKE WORTH, FLA. 33460

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

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Armand M. Almeida

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

1/31/96

Date

966-2497

Daytime Phone

CR2E037 (12/95)