

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 04, 2009
Secretary of State**

DOCUMENT# 761005

Entity Name: LAKESIDE OFFICE PARK I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O SEABOARD ARBORS
2189 CLEVELAND ST, STE 225
CLEARWATER, FL 33765 US

New Principal Place of Business:

Current Mailing Address:

C/O SEABOARD ARBORS
2189 CLEVELAND ST, STE 225
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-2156723 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIGHTON, LENNARD A
2189 CLEVELAND ST
STE 225
CLEARWATER, FL 33765 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 () Delete
Name: YOUNG, ROBERT,
Address: 13910 LAKESHORE #130
City-St-Zip: HUDSON, FL

Title: SDTD () Delete
Name: TAYLOR, WAYNE
Address: 13906 LAKESHORE BLVD #340
City-St-Zip: HUDSON, FL

Title: VD () Delete
Name: DAVIS, GAITHER G
Address: 13910 LAKESHORE BLVD #110
City-St-Zip: HUDSON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: YOUNG, ROBERT
Address: 13910 LAKESHORE #130
City-St-Zip: HUDSON, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: DAVIS, GAITHER G
Address: 13910 LAKESHORE BLVD #110
City-St-Zip: HUDSON, FL

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT YOUNG

PD

03/04/2009

Electronic Signature of Signing Officer or Director

_____ Date