2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State
04-28-2004 90220 007 ****61.25

DOCUMENT # 768227

1. Entity Name
LAKE SHORE VILLAGE MERCHANTS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3900 CLARK RD. SARASOTA, FL 34238 US	P. O. BOX 914 OSPREY, FL 34229

01232004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Progressive Community Mgmt, Inc	Progressive Community Mgmt, Inc
Suite, Apt. #, etc.: 1801 Glengary Street	Suite, Apt. #, etc.: 1801 Glengary Street
City & State: Sarasota FL	City & State: Sarasota, FL
Zip: 34231 Country: USA	Zip: 34231 Country: USA

4. FEI Number 59-2387238 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SUTTON, WILLIAM
MANASOTA MANAGEMENT SERVICES, INC.
748 S. TAMIAMI TRAIL
OSPREY, FL 34229

7. Name and Address of New Registered Agent

Name: Progressive Community Management, Inc
Street Address (P.O. Box Number is Not Acceptable): 1801 Glengary Street
City: Sarasota **FL** Zip Code: 34231

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: J Markel Jim Markel 4/22/04
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, 2004

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	VPD ZIMMERMAN, NATHAN 8447 S. TAMIAMI TRAIL SARASOTA, FL 34238	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	3900 Clark Road, Unit # P1	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ROSE, ALFRED 3900 CLARK RD. SARASOTA, FL 34238	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD Kiefer, Tammera Dr. 3900 Clark Road, Unit # C1 Sarasota, FL 34238	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BILLINGS, DR RICK 3900 CLARK ROAD UNIT #E12 SARASOTA, FL 34238	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS Markel, Jim 1801 Glengary Street Sarasota, FL 34231	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT Sutton, William 1801 Glengary Street Sarasota, FL 34231	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: J Markel 4/22/04 941-921-5393
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #