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NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 769011

1. Corporation Name
LAKESIDE ALTERNATIVES, INC.

Principal Place of Business	Mailing Address
434 W KENNEDY BLVD ORLANDO FL 32810	434 W KENNEDY BLVD ORLANDO FL 32810

2. Principal Place of Business (21) — Suite, Apt. #, etc. (22) — City & State (23) — Zip (24) — Country (25)

2a. Mailing Address (26) — Suite, Apt. #, etc. (27) — City & State (28) — Zip (29) — Country (30)

3. Date Incorporated or Qualified: 06/20/1983

4. FEI Number: 59-2301233 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

WOLF, JULIE
434 W KENNEDY BLVD
ORLANDO FL 32810

10. Name and Address of New Registered Agent

81 Name: Pamela M. Robb
82 Street Address (P.O. Box Number is Not Acceptable): 1311 S. Vineland Road.
83
84 City: Winter Garden FL 85 Zip Code: 34787

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: [signature] 3-31-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAILEY, JOE 100 E. ANDERSON ST., APT 1201 ORLANDO FL 32801	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	~~Amy Erisman~~ (D) ☐ Change ☒ Addition ~~7350 Riverside Place~~ Capt. Samuel Ings ~~Orlando, FL 32810~~ P.O. Box 913 Orlando, FL 32802-0913
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT CAPRAUN, LYNN W 125 SWEET BAY LANE ORLANDO FL 32825	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☒ Addition Hortense Jones 307 Clark St. Eatonville, FL 32751 (D)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARMODY, JULIE 935 GREENTREE DRIVE WINTER PARK FL 32789	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☒ Addition Thomas F. Neal (2nd Vice Chair) P.O. Box 87 Orlando, FL 32804-2235
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ERISMAN, AMY 7350 RIVERSIDE PLACE ORLANDO FL 32810	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☒ Addition Patricia M. Woodbery 1021 Montcalm St. Orlando, FL 32806 (Asst. Sec.)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GARDNER, WAYNE 10148 PINK CARNATION CT ORLANDO FL 32825	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☒ Addition Brent Keller - 11548 Osprey Point Blvd. Clermont, FL 34711 (Treasurer)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD GRASS, GLORIA 2502 SANDY LANE ORLANDO FL 32818	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☒ Addition Jerry Kassab 600 Courtland St., Ste. 100 Orlando, FL 32804 (Board Chair)

CR2E037 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Jonathan Cherry 2/9/99 (407)741-5810
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #