2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State
04-16-2007 90334 042 ****70.00

DOCUMENT # 769011

1. Entity Name
LAKESIDE BEHAVIORAL HEALTHCARE, INC.

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

03272007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

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

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROBB, PAMELA M 1311 WINTER GARDEN-WINELAND ROAD WINTER GARDEN, FL 34787	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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	SD WILENSKY, LIN 9152 POINT CYPRESS DRIVE ORLANDO, FL 32836	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	UC/AS/D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HORTENSE, JONES 307 CLARK ST. EATONVILLE, FL 32751	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KASSAB, JERRY 434 W KENNEDY BLVD ORLANDO, FL 32810	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WHEELER, ROBERT P O BOX 917609 LONGWOOD, FL 327917609	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD BALL, STEPHEN T 1780 OAKBROOK DRIVE LONGWOOD, FL 32779	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D	☒ 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 exemptions contained 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 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: Jerry Kassab Jerry Kassab 4-2-07 407/822-5051
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 400641159
#769011

10. Officers/Directors (Cont'd)

D
Tania Hood Beckel
600 W. King Street
Orlando, FL 32804

S/D
Dr. Michael Bone
1177 Louisiana Avenue, Suite 115
Winter Park, FL 32789

D
Lynn Capraun
15021 Winding Ridge
Clermont, FL 34711

D
Julie Carmody
400 N. New York Avenue, Suite 112
Winter Park, FL 32789

T/D
Andrew Davis
3561 Hollow Oak Run
Oviedo, FL 32766

D
Steven Fisher
111 N. Orange Avenue, Suite 1585
Orlando, FL 32801

C/D
Wayne Gardner
10148 Pink Carnation Court
Orlando, FL 32825

D
Anne Miller
190 North Shore Circle
Casselberry, FL 32707

D
Dawn Neville
2000 E. Hillcrest Street, Apt. 510
Orlando, FL 32803

D
Victor Uvalle
7629 Lake Ola Drive
Mt. Dora, FL 32757

D
Gloria Grass
18533 State Road 44
Eustis, FL 32736