FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F25726

STUART LAKESIDE CORPORATION

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Mailing Address

FILED Jan 21 1997 8:00am Secretary of State

701 S. E. MARTIN LUTHER KING BLVD. STUART FL 34994			701 S. E. Martin Luther King Blvd. Stuart fl 34994-2309								
							3. Date Incorporated or Qualified 03/17/1981	1	te of Last Re 2/1996	eport	
2. Principal Place of Business 28. Mailing Address			Address	,			4. FEI Number	Applied For			
21 26			A - N - N				59-2170033	Not Applicable			
Suite, Apt. 1	я, ets 	27 Stilte. At	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & St	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip Cou			y		8. This corporation has liability for intangible tax under s. 199.032,				
24	9. Name and Address of Cu	29		30		·	Florida Statutes 10. Name and Address of New Re				
DAV	······································	itelit neglateled Age	2111	81	1 1	lame	10. Halle Blid Address of Helf Fre	gracorou r	- Goitt		
OAKOWSKY, STANLEY E 701 SE MARTIN LUTHER KING BLVD.					82 Street Address (P.O. Box Number is Not Acceptable)						
STUART FL 34994			8:			less (F.O. Box Number is Not Acceptab					
							· · · · · · · · · · · · · · · · · · ·				
				84	4 0	City		FL	85 Zip (Code	
office or re	egistered agent, or both, in the S	tate of Florida. Such o	change was .	authorized b	ov th	amed corp e corporat	poration submits this statement for the pation's board of directors. I hereby accept	urpose of t the appo	changing it pintment as	s registered registered	
agent lar	n familiar with, and accept the o	bligations of, Section	607.0505, Fk	orida Statute	95.						
SIGNATURE.	Signatural typed or printed harner of registere	d agent and the if applicable	(NOT	E. Registered A	gent s	ignature requi	red when reinstating)	DATE			
12.		AND DIRECTORS		13.	<u> </u>		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 12	
TITLE	PDST	Ţ	DELETE	1.1 TITLE					Change	Addition	
NAME	OAKOWSKY, STANLEY E			1.2 NAME	Ē						
STREET ADDRESS	701 SE MARTIN LUTHER K	ing blvd.		1.3 STREE	ET ADI	DRES\$					
CITY-S1-71P	STUART FL 34994			1.4 CITY -	-ST-Z	IP					
TITLE	VP		DELETE	2.1 TITLE					Change	Addition	
NAME	CIRIELLO, NICHOLAS G			2.2 NAME	£						
STREET ADDRESS	9090 WILSHIRE BLVD., #20)1		2.3 STREE	ET ADI	DRESS					
CITY-ST-ZIP	BEVERLY HILLS CA			2. 4 CITY	- ST - Z	ZIP					
TITLE			DELETE	3.1 TITLE					Change	Addition	
NAME				3.2 NAM8	E						
STREET ADDRESS				3.3 STREE	et adi	DRESS					
CITY - ST - ZIP				3.4. CHTY	- 51 - 7	ZIP					
TITLE		[DELETE	4 1 TITLE					Change	☐ Addition	
NAME				4 2 NAM	E						
STREET ADDRESS				4 3 STRE	ET ADI	DRESS					
CITY - ST - ZIP				4.4 CfTY	-ST-Z	(IP					
TITLE		<u>"</u> [DELETE	5 1 TOTLE					Change	Addition	
NAME				5.2 NAME	E						
STREET ADDRESS				5.3 STRE	ET ADI	DRESS					
CITY - ST - ZIP				5.4 CITY	- ST - Z	IIP					
TITLE	The state of the s		DELETE	6 1 TITLE					Change	Addition	
NAME				6.2 NAME	E						
STREET ADDRESS				6.3 STRE		ORESS					
CITY, ST. ZIP				6.4 CITY-							

14. Lob 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 inclicated 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if sharped, or of an attachment with an address.

561-287-1877