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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9700001845 (3)

LAKE SHORE ASSOCIATES LTD., CO.

Principal Place of Business

Mailing Address

## FILED Mar 31 1998 8:00am Secretary of State



|   |   | 1899 LINCOLN DRIVE. STE<br>SARASOTA FL 34236 | 202                               | DO NOT WRITE IN THIS                                    | SPACE                             |
|---|---|--|-----------------------------------|---|-----------------------------------|
|   |   |  |                                   | Date Incorporated or Qualified     04/09/1997           |                                   |
| 2. Principal P  | lace of Business  | 2a. Mailing Address                          |                                   | A CEI Number  | Applied For                       |
| 21 131 Gartield Dr 28 131 Cours   |   |  | field Dr                          | 36-3520936  | Not Applicable                    |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 27  |   |  |                                   | 5. Certificate of Status Desired                        | \$8.75 Additional<br>Fee Required |
| City & Stat   | rasota F/   | City & Blate 28 211561                       | a #1                              | Election Campaign Financing     Trust Fund Contribution | \$5.00 May Be<br>Added to Fees    |
| Zip <b>3</b> 4  | 2.34. 25 Sandsof  | <sup>Zip</sup> 34736 3                       | Sardsold                          | 8. This corporation owes or has paid the cu             |                                   |
| <u>~ / </u>   | 9. Name and Address of Current                                    |  | U JETUSUT                         | 10. Name and Address of New Registered                  |                                   |
| HOUK, RAYMOND E   |   |  |                                   | 4 .7. 12  | -7                                |
|   | 99 LINCOLN DR., STE 202   |  | 20 0 0                            | TOUR Maymore  |                                   |
|   | RASOTA FL 34236   |  | 82 Street Add                     | tress (P.O. Box Number is Not Acceptable)               | 2 1                               |
| 83  |   |  |                                   |   |                                   |
|   |   |  | 28                                | 77256 T8  |                                   |
|   |   |  | 84 City                           | FL  | 85 Zip Code                       |
|   |   |  |                                   |   |                                   |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. |   |  |                                   |   |                                   |
| SIGNATURE Signature, typied or printed name of registered agent and tille if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE   |   |  |                                   |   |                                   |
| 12,   | Signature, typed or printed name of registered agent OFFICERS AND |  | Registered Agent signature requ   | ADDITIONS/CHANGES TO OFFICERS AN                        | D DIRECTORS IN 12                 |
| TITLE   | PD  | DELETE                                       | 1.1 TITLE                         | ADDITIONAL PROPERTY AND                                 | Change Addition                   |
| NAME  | HOUK, RAYMOND E   | E Presie                                     | 1.2 NAME                          |   |                                   |
| STREET ADDRESS  | 131 GARFIELD DRIVE, #3A   |  | 1.3 STREET ADDRESS                |   |                                   |
|   | SARASOTA FL   |  | • '                               |   | <b> </b> }                        |
| CITY-ST-ZIP<br>TITLE  | VI  | DELETE                                       | 1.4 CITY-ST-ZIP<br>2.1 TITLE      |   | Change Addition                   |
| NAME  | HOUK, PATRICIA  |  | 2.2 NAME                          |   |                                   |
|   | 131 GARFIELD DRIVE, #3A   |  |                                   |   |                                   |
| STREET ADDRESS  | SARASOTA FL   |  | 2.3 STREET ADDRESS                | ***   | Ì                                 |
| CITY-ST-ZIP<br>TITLE  | S S   | DELETE                                       | 2. 4 CITY - ST - ZIP<br>3.1 TITLE | · · · · · · · · · · · · · · · · · · ·                   | Change Addition                   |
| =:  | *   | - ptetie                                     |                                   |   | Li change Li Addition             |
| NAME<br>STREET AROUSON  | WILLIAMS III, RICHARD L<br>222 N LASALLE ST., STE 2500            |  | 3.2 NAME                          |   | 1                                 |
| STREET ADDRESS  | CHICAGO IL  |  | 3.3 STREET ADDRESS                |   | }                                 |
| CITY-ST-ZIP<br>TITLE  | CHICAGO IL  | DELETE                                       | 3.4. CITY-ST-ZIP<br>4.1 TITLE     |   | Change Addition                   |
|   |   | FT DELEIE                                    |                                   |   | THE CHRISTIAN THE SERVICE         |
| NAME  |   |  | 4, 2 NAME                         |   | ł                                 |
| STREET ADDRESS  |   |  | 4.3 STREET ADDRESS                |   |                                   |
| CITY-ST-ZIP   |   | Dei Pre                                      | 4.4 CHY-ST-ZIP                    |   | Digital Address                   |
| TATLE   |   | DELETE                                       | 5.1 TITLE                         |   | Change                            |
| NAME  |   |  | 5.2 NAME                          |   |                                   |
| STREET ADDRESS  |   |  | 5.3 STREET ADDRESS                |   |                                   |
| CITY-ST-ZIP   |   |  | 5.4 CITY-ST-ZIP                   |   |                                   |
| TITLE   |   | ☐ DELETE                                     | 6.1 TITLE                         |   | Change Addition                   |
| NAME  |   |  | 6.2 NAME                          |   | }                                 |
| STREET ADDRESS  |   |  | 6.3 STREET ADDRESS                |   |                                   |
| CITY-ST-ZIP   |   |  | 6.4 CITY - ST - ZIP               |   |                                   |
| 14. Thereby o   | ertify that the information supplied with                         | this filing does not qualify for I           | the exemption stated in           | Section 119.07(3)(i), Florida Statutes, I further c     | ertify 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 fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

3-25-76

94/35-840-43