

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

FILED  
May 21 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H91390 (5)

1. Corporation Name

LAKESIDE VILLAGE MOBILE HOME PARK HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

11000 S.E. FEDERAL HIGHWAY, LOT #7  
HOBE SOUND FL 33455

Mailing Address

11000 S.E. FEDERAL HIGHWAY, LOT #7  
HOBE SOUND FL 33455

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/24/1985

4. FEI Number

59-2618890

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

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

DURGIN, CAROL  
77 24 LAKESIDE VILLAGE  
11000 S.E. FEDERAL HIGHWAY  
HOBE SOUND FL 33455

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	POYNTON, RUTH	
STREET ADDRESS	11000 S.E. FEDERAL HIGHWAY, LOT #7	
CITY-ST-ZIP	HOBE SOUND FL 33455	

TITLE	SD	<input type="checkbox"/> DELETE
NAME	GAZZOLA, GENEVIEVE	
STREET ADDRESS	11000 S.E. FEDERAL HIGHWAY, LOT #7	
CITY-ST-ZIP	HOBE SOUND FL 33455	

TITLE	TD	<input type="checkbox"/> DELETE
NAME	FULTON, EDGAR	
STREET ADDRESS	11000 S.E. FEDERAL HIGHWAY, LOT #7	
CITY-ST-ZIP	HOBE SOUND FL 33455	

TITLE	D	<input type="checkbox"/> DELETE
NAME	COPPA, VIRGINIA	
STREET ADDRESS	11000 S.E. FEDERAL HIGHWAY, LOT #7	
CITY-ST-ZIP	HOBE SOUND FL 33455	

TITLE	D	<input type="checkbox"/> DELETE
NAME	RENTON, BRUCE	
STREET ADDRESS	11000 S.E. FEDERAL HIGHWAY, LOT #7	
CITY-ST-ZIP	HOBE SOUND FL 33455	

TITLE	D	<input type="checkbox"/> DELETE
NAME	BODNAR, JOHN	
STREET ADDRESS	11000 S.E. FEDERAL HIGHWAY, LOT #7	
CITY-ST-ZIP	HOBE SOUND FL 33455	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Nicotra, Angelo	
1.3 STREET ADDRESS	11,000 SE Federal Hwy, Hobe Sound, FL	
1.4 CITY-ST-ZIP		

2.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Douglas, Audrey	
2.3 STREET ADDRESS	11,000 SE Federal Hwy, #7	
2.4 CITY-ST-ZIP	Hobe Sound, FL	

3.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Jordan, Mildred	
3.3 STREET ADDRESS	11,000 SE Federal Hwy #7	
3.4 CITY-ST-ZIP	Hobe Sound, FL	

4.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Coppa, Virginia	
4.3 STREET ADDRESS	11,000 SE Federal Hwy #7	
4.4 CITY-ST-ZIP	Hobe Sound, FL	

5.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Lalka, John	
5.3 STREET ADDRESS	11,000 SE Federal Hwy #7	
5.4 CITY-ST-ZIP	Hobe Sound, FL	

6.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Bodnar, John	
6.3 STREET ADDRESS	11,000 SE Federal Hwy #7	
6.4 CITY-ST-ZIP	Hobe Sound, FL	

14. I hereby certify that the information supplied with this filing does not qualify for it indicated on this annual report or supplemental annual report is true and accurate officer or director of the corporation or the receiver or trustee empowered to execute Block 12 or Block 13 if changed, or on an attachment with an address.

7.1

D  
Rish, Charles  
11,000 SE Federal Hwy #7

CR2E034 (10/97)