

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000004256

**FILED**  
**May 06, 2011**  
**Secretary of State**

**Entity Name:** NORTHSTAR LAKESIDE, LLC

**Current Principal Place of Business:**

1900 ST. JAMES PLACE, STE. 200  
HOUSTON, TX 77056

**New Principal Place of Business:**

**Current Mailing Address:**

1900 ST. JAMES PLACE, STE. 200  
HOUSTON, TX 77056

**New Mailing Address:**

**FEI Number:** 41-2153841

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** CEO  
**Name:** HAMILTON, WILLIAM M  
**Address:** 1900 ST.JAMES PLACE SUITE 200  
**City-St-Zip:** HOUSTON, TX 77056

**Title:** PRES  
**Name:** SULLIVAN, BRIAN  
**Address:** 1900 ST.JAMES PLACE SUITE 200  
**City-St-Zip:** HOUSTON, TX 77056

**Title:** VP  
**Name:** GILMORE, DEB  
**Address:** 1900 ST.JAMES PLACE SUITE 200  
**City-St-Zip:** HOUSTON, TX 77056

**Title:** VP  
**Name:** TEAL, ALAN  
**Address:** 1900 ST.JAMES PLACE SUITE 200  
**City-St-Zip:** HOUSTON, TX 77056

**Title:** VP  
**Name:** TAYLOR, DETLEF  
**Address:** 1900 ST.JAMES PLACE SUITE 200  
**City-St-Zip:** HOUSTON, TX 77056

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** WILLIAM M HAMILTON

CEO

05/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date