

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000007673

FILED  
Apr 25, 2002 8:00 AM  
Secretary of State

**Entity Name:** LAKESIDE PLANTATION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2975 BOBCAT VILLAGE CENTER ROAD  
SUITE 100  
NORTH PORT, FL 34286

**New Principal Place of Business:**

**Current Mailing Address:**

2975 BOBCAT VILLAGE CENTER ROAD  
SUITE 100  
NORTH PORT, FL 34286

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PERSSON, DAVID P  
1820 RINGLING BOULEVARD  
SARASOTA, FL 34236 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MURRAY, WILLIAM L  
Address: 2975 BOBCAT VILLAGE CENTER ROAD, SUITE 100  
City-St-Zip: NORTH PORT, FL 34286

Title: VD ( ) Delete  
Name: TROUTT, ROBERT  
Address: 2975 BOBCAT VILLAGE CENTER ROAD, SUITE 100  
City-St-Zip: NORTH PORT, FL 34286

Title: TD ( ) Delete  
Name: TROUTT, JOHN E  
Address: 2975 BOBCAT VILLAGE CENTER ROAD, SUITE 100  
City-St-Zip: NORTH PORT, FL 34286

Title: SD ( ) Delete  
Name: ZUZIAK, GERRY  
Address: 2975 BOBCAT VILLAGE CENTER ROAD, SUITE 100  
City-St-Zip: NORTH PORT, FL 34286

Title: D ( ) Delete  
Name: ARNOLD, KENT E  
Address: 2975 BOBCAT VILLAGE CENTER ROAD, SUITE 100  
City-St-Zip: NORTH PORT, FL 34286

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MURRAY, WILLIAM L  
Address: 2975 BOBCAT VILLAGE CENTER ROAD, SUITE 100  
City-St-Zip: NORTH PORT, FL 34286

Title: PD (X) Change ( ) Addition  
Name: TROUTT, ROBERT  
Address: 2975 BOBCAT VILLAGE CENTER ROAD, SUITE 100  
City-St-Zip: NORTH PORT, FL 34286

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT TROUTT

P

04/25/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date