

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 05, 2011
Secretary of State

Entity Name: LAKESIDE ASSOCIATION, INC.

Current Principal Place of Business:

1915 LAVERS CIRCLE
E106
DELRAY BEACH, FL 33444 US

New Principal Place of Business:

Current Mailing Address:

1915 LAVERS CIRCLE
E106
DELRAY BEACH, FL 33444 US

New Mailing Address:

FEI Number: 20-1219097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABERGE, PATRICIA
860 US HIGHWAY ONE
SUITE 108
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

HILLEY WYANT CORTEZ
860 US HIGHWAY ONE
SUITE 108
NORTH PALM BEACH, FL 33408 US

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: PATRICIA LABERGE

01/05/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: LARUE, JOSEPH
Address: 1915 LAVERS CIR., #E507
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: VP
Name: HONOR, JANET
Address: 1915 LAVERS CIR., #E310
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: SD
Name: REIS, FRANK
Address: 950 LAVERS CIRCLE #F403
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: VPF
Name: SHULL, WILLIAM
Address: 2025 LAVERS CIRCLE #D305
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: TD
Name: ATTARD, AL
Address: 1915 LAVERS CIRCLE #502
City-St-Zip: DELRAY BEACH, FL 33444 US

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH LARUE

PD

01/05/2011

Electronic Signature of Signing Officer or Director

Date