## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03191

FILED Jan 05, 2012 Secretary of State

Entity Name: LAKESIDE CLUB AND POOL ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

12606 SHADOW RIDGE BLVD. HUDSON, FL 346692791

Current Mailing Address: New Mailing Address:

12606 SHADOW RIDGE BLVD. HUDSON, FL 346692791

FEI Number: 59-2548866 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TROTTER, BETH 12819 CEDAR RIDGE DR HUDSON, FL 34669 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: [

Name: OVELLETTE, CAROL Address: 12802 LAKE TREE LN City-St-Zip: HUDSON, FL 34669 US

Title: SD

Name: BRANDT, BETTY

Address: 12601 SHADOW RIDGE BLVD City-St-Zip: HUDSON, FL 34669 US

Title: TD

Name: TROTTER, BETH
Address: 12819 CEDAR RIDGE DR
City-St-Zip: HUDSON, FL 34669 US

Title: VD

 Name:
 FOUBERT, PAT

 Address:
 12006 MAHOGANY DR

 City-St-Zip:
 HUDSON, FL 34669 US

Title: PD

Name: BRADY, WILLIAM JR Address: 12801 LAKE TREE LANE City-St-Zip: HUDSON, FL 34669 US

Title: [

Name: TIMOTHY, KELLY
Address: 12606 PALM TREE DR
City-St-Zip: HUDSON, FL 34669 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: BETH L TROTTER MISS 01/05/2012