## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03510

FILED Jaņ 3<u>0, 2</u>009 Secretary of State

Entity Name: LAKESIDE WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

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

3885 INVESTMENT LN #6 RIVIERA BEACH, FL 33404

**Current Mailing Address: New Mailing Address:** 

3885 INVESTMENT LN #6 RIVIERA BEACH, FL 33404

FEI Number: 59-2452751 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:

EICHOFF, THOMAS EICKHOFF, THOMAS 3885 INVÉSTMENT LN 3885 INVESTMENT LN **UNIT 8** UNIT 8

RIVIERA BCH, FL 33404 US RIVIERA BCH, FL 33404 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.

Name:

SIGNATURE: THOMAS EICKHOFF 01/30/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete EICKHOF, TOM EICKHOFF, THOMAS Name: Name: 3885 INVESTMENT LN UNIT 8 Address: 3885 INVESTMENT LN UNIT 8 Address: City-St-Zip: RIVIERA BEACH, FL 33404 City-St-Zip: RIVIERA BEACH, FL 33404

Title: Title: (X) Change ( ) Addition ( ) Delete

ENINGER, CHARLES M Name: EHINGER, CHARLES N Name: Address: 3905 INVESTMENT LANE #9 Address: 3905 INVESTMENT LANE #9 City-St-Zip: RIVIERA BEACH, FL 33404 City-St-Zip: RIVIERA BEACH, FL 33404

Title: () Delete Title: (X) Change ( ) Addition WALLY, CHRISTENSEN KOSOWSKY, MIKE Name: Name:

3885 INVESTMENT LN UNIT 4 3905 INVESTMENT LANE #16 Address: Address: City-St-Zip: RIVIERA BCH, FL 33404 City-St-Zip: RIVIERA BCH, FL 33404

Title: (X) Delete Title: () Change () Addition

KUSOWSKY, MIKE Name: Address: 3905 INVESTMENT LANE #16 Address: City-St-Zip: RIVERA BEACH, FL 33404 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: THOMAS EICKHOFF PR 01/30/2009