

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004803

FILED
Apr 24, 2009
Secretary of State

Entity Name: LAKESIDE BUSINESS CENTER CONDOMINIUM OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

3740 ST. JOHNS BLUFF ROAD SOUTH
SUITE 16
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

11732 BEACH BLVD
JACKSONVILLE, FL 32246 US

Current Mailing Address:

3740 ST. JOHNS BLUFF ROAD SOUTH
SUITE 16
JACKSONVILLE, FL 32224 US

New Mailing Address:

11732 BEACH BLVD
JACKSONVILLE, FL 32246 US

FEI Number: 26-0176319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS CONDOS USA
3740 ST. JOHNS BLUFF ROAD SOUTH
SUITE 16
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

SIGNATURE REALTY & MANAGEMENT, INC.
4003 HARTLEY RD.
JACKSONVILLE, FL 32257 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: DELLA T. MYERS

04/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WALSHAW, LARRY
Address: 3740 ST. JOHNS BLUFF ROAD SOUTH, SUITE 16
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: VP () Delete
Name: BRADY, JAMES
Address: 3740 ST. JOHNS BLUFF ROAD SOUTH, SUITE 16
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WALSHAW, LARRY
Address: 11732 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: VP (X) Change () Addition
Name: BRADY, JAMES
Address: 11732 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: SECT () Change (X) Addition
Name: BRADY, HEATHER
Address: 11732 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32246

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: DELLA T. MYERS

PM

04/24/2009

Electronic Signature of Signing Officer or Director

Date