2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 18, 2004 8:00 am Secretary of State DOCUMENT # N13408 1. Entity Name 02-18-2004 90009 049 ****61.25 LAKESIDE CIVIC ASSOCIATION, INC. Principal Place of Business Mailing Address P.O. BOX 10271 P.O. BOX 10271 **LARGO FL 33773** LARGO FL 33773 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-2035012 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ADAMS, JANET E Street Address (P.O. Box Number is Not Acceptable) 9734 109TH AVE. N. **LARGO FL 33773** City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change ☐ Addition LARSON, HERB NAME 11518 HARBORSIDE CIR. STREET ADDRESS STREET ADDRESS **LARGO FL 33773** CITY-ST-ZIP CITY-ST-ZIP Delete שע Addition RITCHEY, GREG NAME KAREN LUCAS NAME 10943 HARBORSIDE DRIVE 11035 TRADEWINDS BLVD STREET ADDRESS STREET ADDRESS **LARGO FL 33773** CITY-ST-7IP CITY-ST-ZIP LARGO, FL 33773 TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition ADAMS, JANET E NAME NAME 9734 109TH AVE. N. STREET ADDRESS STREET ADDRESS LARGO FL 33773 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE [] Change ☐ Addition HAWKINS, BLONDIE NAME NAME 11687 TRADEWINDS BLVD. STREET ADDRESS STREET ADDRESS LARGO FL 33773 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition DOYLE, TAMMY NAME NAME 11783 TRADEWINDS BLVD. STREET ADDRESS STREET ADDRESS LARGO FL 33773 CITY-ST-ZIP CITY-ST-ZIP D2 Delete TITLE Addition TITLE ☐ Change BELMONTE, DOROTHY RON CINNAMON NAME NAME 11622 TRADEWINDS BLVD. 11301 TRADEWINDS BLUD STREET ADDRESS STREET ADDRESS **LARGO FL 33773** CITY-ST-ZIP LARGO, FL 33773

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered.

FILED