2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2006
Secretary of State

DOCUMENT# N13408

Entity Name: LAKESIDE CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 10271
LARGO, FL 33773

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10271
LARGO, FL 33773 US

New Mailing Address:

FEI Number: 59-2035012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ADAMS, JANET E
9734 109TH AVE. N.
LARGO, FL 33773 US

Name and Address of New Registered Agent:

DOYLE, TAMMY M
11783 TRADEWINDS BLVD.
LARGO, FL 33773 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: TAMMY M. DOYLE 08/07/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LARSON, HERB
Address: 11518 HARBORSIDE CIR.
City-St-Zip: LARGO, FL 33773

Title: VD ( ) Delete
Name: LUCAS, KAREN
Address: 11035 TRADEWINDS BLVD
City-St-Zip: LARGO, FL 33773

Title: TD (X) Delete
Name: ADAMS, JANET E
Address: 9734 109TH AVE. N.
City-St-Zip: LARGO, FL 33773

Title: SD (X) Delete
Name: HAWKINS, BLONDIE
Address: 11687 TRADEWINDS BLVD.
City-St-Zip: LARGO, FL 33773

Title: D1 ( ) Delete
Name: DOYLE, TAMMY
Address: 11783 TRADEWINDS BLVD.
City-St-Zip: LARGO, FL 33773

Title: D2 ( ) Delete
Name: CINNAMON, RON
Address: 11301 TRADEWINDS BLVD
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: FETNER, HUGH
Address: 10943 HARBORSIDE DR.
City-St-Zip: LARGO, FL 33773

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HUGH FETNER PD 08/07/2006
Electronic Signature of Signing Officer or Director Date