

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14261

FILED  
May 04, 2010  
Secretary of State

**Entity Name:** LAKESIDE COLONY, INC.

**Current Principal Place of Business:**

109 LAKESIDE COLONY DR  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

109 LAKESIDE COLONY DR  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

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

CHARTRAND, PHILIP E  
109 LAKESIDE COLONY DR  
TARPON SPRINGS, FL 34689 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: PD  
Name: CHARTRAND, PHILIP  
Address: 109 LAKESIDE COLONY DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: TD  
Name: HAGEN, JAMES  
Address: 113 LAKESIDE COLONY DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VD  
Name: RISMONDO, PETER  
Address: 106 LAKESIDE COLONY DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: SD  
Name: THORNTON, MELISSA  
Address: 110 LAKESIDE COLONY DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D  
Name: ALCAMO, THOMAS  
Address: 112 LAKESIDE COLONY DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D  
Name: INTRABARTOLA, LENNY  
Address: 105 LAKESIDE COLONY DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

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: PHILIP E. CHARTRAND

PD

05/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date