2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# -

N17000006157

FILED Feb 13, 2009 Secretary of State

Entity Name:

LAKESIDE WOODS SOUTH ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1180 SOUTHLAKE CT. 1100 SOUTHLAKE CT. VENICE, FL 34285 VENICE, FL 34285 **Current Mailing Address: New Mailing Address:** 1100 SOUTHLAKE CT 1100 SOUTHLAKE CT. VENICE, FL 34285 VENICE, FL 34285 US FEI Number: 65-0679906 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: FOSTER, JOSEPH 1180 SOUTHLAKE CT VENICE, FL 34285 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition JEANETTE, WILDER Name: Name: 1129 SOUTHLAKE COURT Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: Title: () Delete () Change () Addition Name: FOSTER, JOSEPH Name: 1180 SOUTHLAKE COURT Address: Address: VENICE, FL 34285 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition LEINWEAVER, ROBERT Name: Name: 1109 SOUTHLAKE CT. Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: () Delete Title: () Change () Addition HUBAI, PAUL Name: Name: Address: 1125 SOUTH LAKE COURT Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: Title: () Delete () Change () Addition DENLER, ROBERT Name: Name: 1102 SOUTHLAKE CT Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: () Delete Title: (X) Change () Addition DELL, CHERYL Name: Name: ABEL, PATRICIA 1118 SOUTHLAKE COURT 1188SOUTHLAKE COURT Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34285

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT LEINWEAVER T 02/13/2009