

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 20, 2005 8:00 am
Secretary of State

04-15-2005 90094 047 ****61.25

DOCUMENT # N18498 1. Entity Name VILLAGE LAKELAND LAKESIDE CLUB, INC					
Principal Place of Business THE CLUB HOUSE 3574 LAZY LAKE DRIVE, NORTH LAKELAND FL 33801			Mailing Address THE CLUB HOUSE 3574 LAZY LAKE DRIVE, NORTH LAKELAND FL 33801		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-2752600				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BAHHR, GEORGE 501 OAKRIDGE EAST LAKELAND FL 33801			Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL 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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-appointing)					
FILE NOW FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, HERMAN 440 LEASURE PLACE LAKELAND FL 33801	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ROGER LACOF 447 LEISURE PL LAKELAND FL 33801	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BACHR, GEORGE 501 OAKRIDGE EAST LAKELAND FL 33801	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT HERMAN MILLER 440 LEISURE PL LAKELAND FL 33801	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLUCCI, ANTHONY 535 OAKRIDGE WEST LAKELAND FL 33801	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER JEANNE DAVIS 425 PERCH PL LAKELAND FL 33801	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FANJOY, CURT 3556 LAZY LAKE DR N LAKELAND FL 33801	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECT. BETTE MARTIN 546 OAKRIDGE EAST LAKELAND FL 33801	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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.					
SIGNATURE: JEANNE K DAVIS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			5-17-05 Date		