

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29744

FILED
Jan 06, 2010
Secretary of State

Entity Name: LAKESIDE OF NAPLES RESIDENTS ASSOCIATION, INC.

Current Principal Place of Business:

7600 AIRPORT RD N
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

7600 AIRPORT RD N
NAPLES, FL 34109

New Mailing Address:

FEI Number: 65-0127436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
ATTN: GREGORY MARLER
999 VANDERBILT BEACH RD. #501
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

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: P
Name: PHILIP, LISA
Address: 2654 AFT AVE
City-St-Zip: NAPLES, FL 34109

Title: D
Name: PETRIK, BETTE
Address: 2864 MIZZEN WAY Y204
City-St-Zip: NAPLES, FL 34109

Title: VP
Name: HOMILLER, WILLIAM
Address: CITRUS LAKE DR. C-205
City-St-Zip: NAPLES, FL 34109

Title: D
Name: FOSTER, SABINE
Address: 2880 CITRUS LAKE DR. Q102
City-St-Zip: NAPLES, FL 34109

Title: S
Name: WAGNER, WILLIAM
Address: 2651 CITRUS LAKE DR. C-205
City-St-Zip: NAPLES, FL 34109

Title: T
Name: SULLIVAN, LINDA
Address: 2517 SAILORS WAY
City-St-Zip: NAPLES, FL 34109

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: CRAIG A. CASTLE CAM 28697

MGR

01/06/2010

Electronic Signature of Signing Officer or Director

Date