2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N30155

1. Entity Name

LAKESIDE CLUB, INC.

FILED
Mar 09, 2000 8:00 am
Secretary of State
03-09-2000 90136 001 ****61.25
03-09-2000 90136 002 *****8.75

Principal Place of Business	Mailing Address
C/O KAY G. WILLIAMSON 6100 TOUCAN DR. ENGLEWOOD FL 34224 US	C/O KAY G. WILLIAMSON 6100 TOUCAN DR. ENGLEWOOD FL 34224-8781 US

DO NOT WRITE IN THIS SPACE

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 65-0097472 ☐ 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
WILLIAMSON, KAY G 8340 KINGLET DR ENGLEWOOD FL 34224	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.

SIGNATURE Kay G. Williamson Kay G. Williamson 3-5-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MANNING, KARL 8460 BUTTONQUAIL DR ENGLEWOOD FL 34224	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WILLIAMSON, KAY G 8340 KINGLET DR ENGLEWOOD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GODLEWSKY, ROBERT 8358 KINGLET DR ENGLEWOOD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WRIGHT, MARGARET 8466 KINGLET DR ENGLEWOOD FL 34224	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KAUFHOLD, EDNA 8472 NIGHTHAWK DR ENGLEWOOD FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Barbara A. Harrington 6121 Shearwater Dr. ~~Englewood, FL 34224~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LANG, THOMAS 8467 BUTTONQUAIL DR ENGLEWOOD FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MD Donald G. Sanson 6076 Shearwater Dr. ~~Englewood, FL 34224~~	☐ Change ☒ Addition

CR2E037 (9/99)

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: MARGARET WRIGHT Margaret L. Wright 3/3/00 941-474-7395
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

N30155

100R

D
Paul W. Corliss
6344 Partridge Ave.
Englewood, FL 34224

TD
John J. Leonard
8364 Kinglet Dr.
Englewood, FL 34224

D
Jerry L. Zuidema
8473 Buttonquail Dr.
Englewood, FL 34224