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

FILED
Apr 04, 2005 8:00 am
Secretary of State
03-07-2005 90316 001 ****61.25
03-07-2005 90316 002 *****8.75

DOCUMENT # N30155

1. Entity Name
LAKESIDE CLUB, INC.

66UU8445

1st MOORE CR2E037 (10/04)

Principal Place of Business	Mailing Address
LAKESIDE CLUB, INC. 6100 TOUCAN DR. ENGLEWOOD FL 34224 US	LAKESIDE CLUB, INC. 6100 TOUCAN DR. ENGLEWOOD FL 34224 US

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

WILLIAMSON, KAY
8340 KINGLET DR.
ENGLEWOOD FL 34224

7. Name and Address of New Registered Agent

Name: Linda Jester
Street Address (P.O. Box Number is Not Acceptable): 8455 Kinglet Dr.
Englewood, Fl. 34224
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: Linda Jester — Signature, typed or printed name of registered agent and title if applicable
Linda Jester — (NOTE: Registered Agent signature required when reinstating)
DATE: 3/31/05

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	PD WILLIAMSON, KAY 8340 KINGLET DR. ENGLEWOOD FL 34224	☐ Delete	Director Kay Williamson 8340 Kinglet Dr. Englewood, FL. 34224	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HOOD, SHARON 6079 SHEARWATER DR. ENGLEWOOD FL 34224	☐ Delete	PD Linda Jester 8455 Kinglet Dr. Englewood, Fl. 34224	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BROWN, JOSEPH 6101 TOUCAN DR. ENGLEWOOD FL 34224	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ZUIDEMA, JERRY 8473 BUTTONQUAIL DR. ENGLEWOOD FL 34224	☒ Delete	Director Larry Connary 8419 Buttonquail Dr. Englewood, Fl. 34224	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MITCHELL, TOM 6092 SHEARWATER DR. ENGLEWOOD FL 34224	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COOPER, KEN 8418 NIGHTHAWK DR. ENGLEWOOD FL 34224	☐ Delete		☐ Change ☐ Addition

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: Sharon Hood — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Sharon E. Hood — Date: 3/23/05 — Daytime Phone #: 941-474-0630