

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30155

FILED
Mar 11, 2009
Secretary of State

Entity Name: LAKESIDE CLUB, INC.

Current Principal Place of Business:

LAKESIDE CLUB, INC.
6100 TOUCAN DR.
ENGLEWOOD, FL 34224 US

New Principal Place of Business:

Current Mailing Address:

LAKESIDE CLUB, INC.
6100 TOUCAN DR.
ENGLEWOOD, FL 34224 US

New Mailing Address:

FEI Number: 65-0097472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EYLES, EDWARD
6073 SHEARWATER DR.
ENGLEWOOD, FL 34224 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: D () Delete
Name: WILLIAMSON, KAY
Address: 8340 KINGLET DR.
City-St-Zip: ENGLEWOOD, FL 34224

Title: P () Delete
Name: EYLES, EDWARD
Address: 6073 SHEARWATER DR.
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: CONNARY, LARRY
Address: 8419 BUTTONQUAIL DR
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: FISHER, HARRY
Address: 8461 TANAKA DR.
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: MARLETTTE, GENEVA
Address: 8485 TANAKA DR
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: SHULTZ, DARLENE
Address: 6119 REDWING AVE.
City-St-Zip: ENGLEWOOD, FL 34224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

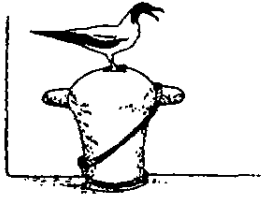
SIGNATURE: MARY R GODLEWSKY

TREA

03/11/2009

Electronic Signature of Signing Officer or Director

Date



Lakeside Club, Inc.

6100 Toucan Drive
Englewood, Florida 34224



March 16, 2009

N30155

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32314

Dear Sirs:

This is in regard to Document #N30155 from Lakeside Club, Inc. There are three more Directors that should be added as follows:

- S Sharon E. Hood
6079 Shearwater Dr.
Englewood, FL 34224
- T Mary R. Godlewsky
8358 Kinglet Dr.
Englewood, FL 34224
- D Jerry Mapes
8436 Buttonquail Dr.
Englewood, FL 34224

If there is something more needed please let us know. Thank you.

Sharon Hood

Sharon Hood
Secretary