

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

DOCUMENT # N30155

1. Entity Name
LAKESIDE CLUB, INC.



03-24-2003 90976 001 *****8.75
03-24-2003 90976 002 *****61.25

Principal Place of Business C/O BARBARA HARRINGTON 6100 TOUCAN DR. ENGLEWOOD FL 34224 US	Mailing Address C/O BARBARA HARRINGTON 6100 TOUCAN DR. ENGLEWOOD FL 34224 US
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2. Principal Place of Business Lakeside Club, Inc.	3. Mailing Address Lakeside Club, Inc.
Suite, Apt. #, etc. 6100 Toucan Dr.	Suite, Apt. #, etc. 6100 Toucan Dr.

City & State Englewood, FL	City & State Englewood, FL
Zip 34224	Zip 34224
Country USA	Country USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0097472	Applied For ☐
5. Certificate of Status Desired ☒	Not Applicable ☐
\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**WRIGHT, MARGARET
8466 KINGLET DR
ENGLEWOOD FL 34224**

7. Name and Address of New Registered Agent
Name
Kay Williamson
Street Address (P.O. Box Number is Not Acceptable)
8340 Kinglet Dr.
City
Englewood **FL** Zip Code
34224

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 **Kay Williamson** *Kay Williamson President* **3-18-03**
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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRAVER, MARILYN 6382 PARTRIDGE AVENUE ENGLEWOOD FL 34224 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARRINGTON, BARBARA A 6121 SHEARWATER DR ENGLEWOOD FL 34224 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVANS, PHYLLIS 8406 NIGHTHAWK DR ENGLEWOOD FL 34224 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HARE, DELORES 8353 KINGLET DR ENGLEWOOD FL 34224 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRINGTON, BARBARA A 6121 SHEARWATER DR ENGLEWOOD FL 34224 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LANG, TOM 8467 BUTTONQUAIL DR ENGLEWOOD FL 34224 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Kay Williamson 8340 Kinglet Dr. Englewood FL 34224 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sharon Hood 6079 Shearwater Dr. Englewood FL 34224 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Phyllis Evans 8406 Nighthawk Dr. Englewood FL 34224 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jerry Zuidema 8473 Buttonquail DR. Englewood FL 34224 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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: **Margaret Wright** *Margaret Wright*

3-17-03 941 474-7395

CR2E037 (10/02)

Attachment #

Attachment

55019080
N30155

Officers and Directors

^{SD}
Margaret Wright same
8466 Kinglet Dr.
Englewood, FL 34224

D same
Joe Brown
6101 Toucan Dr.
Englewood, FL 34224

D same
Harry Fisher
8461 Tanaka Dr.
Englewood, FL 34224
