

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31856

FILED  
Apr 23, 2009  
Secretary of State

**Entity Name:** LAKESIDE CARRIAGE HOMES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4306 ARNOLD AVE  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 110339  
NAPLES, FL 34108

**New Mailing Address:**

**FEI Number:** 65-0127422

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KUETER, BEVERLY  
C/O SUNBURST MGMT CORP  
4306 ARNOLD AVE  
NAPLES, FL 34104 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: DP ( ) Delete  
Name: SIDERI, WARREN  
Address: 2541 CITRUS LAKE DR. #202  
City-St-Zip: NAPLES, FL 34109

Title: DT ( ) Delete  
Name: HOMILLER, WILLIAM  
Address: 2611 CITRUS LAKE DR. #205  
City-St-Zip: NAPLES, FL 34109

Title: DS ( ) Delete  
Name: LIGHT, GERRY  
Address: 2611 CITRUS LAKE DR. #101  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: HOMILLER, WILLIAM  
Address: 2611 CITRUS LAKE DR. #205  
City-St-Zip: NAPLES, FL 34109

Title: DVP (X) Change ( ) Addition  
Name: LINDENBAUM, SHIRLEY  
Address: 2781 CITRUS LAKE DR. #101  
City-St-Zip: NAPLES, FL 34109

Title: DST (X) Change ( ) Addition  
Name: LATESSA, LYNDIA  
Address: 2550 CITRUS LAKE DR. #201  
City-St-Zip: NAPLES, FL 34109

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: WILLIAM HOMILLER

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04/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date