

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31859

FILED
Apr 26, 2005
Secretary of State

Entity Name: LAKESIDE GARDENS CONDOMINIUM B CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ADVANCED PROPERTY MGMT. SERVICE, INC.
3350 WOODS EDGE CIRCLE, STE. 104
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

4306 ARNOLD AVE.
NAPLES, FL 34104 US

Current Mailing Address:

ADVANCED PROPERTY MGMT. SERVICE, INC.
3350 WOODS EDGE CIRCLE, STE. 104
BONITA SPRINGS, FL 34134 US

New Mailing Address:

P.O. BOX 110339
NAPLES, FL 34108 US

FEI Number: 65-0127417 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, SUSAN L
ADVANCED PROPERTY MGMT. SERVICE, INC.
3350 WOODS EDGE CIRCLE, STE. 104
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

KUETER, BEVERLY L
C/O SUNBURST MGMT.
4306 ARNOLD AVE.
NAPLES, FL 34104 US

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: BEVERLY KUETER

04/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: MCGARRY, NOREEN
Address: 2761 CITRUS LAKE DR. H-202
City-St-Zip: NAPLES, FL 34109

Title: DP () Delete
Name: BOVEY, RAYMOND
Address: 2820 CITRUS LAKE DR. T-101
City-St-Zip: NAPLES, FL 34109

Title: DST () Delete
Name: HERMANN, ROBERT
Address: 2870 CITRUS LAKE DR #101
City-St-Zip: NAPLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MCGARRY, NOREEN
Address: 2761 CITRUS LAKE DR. #202
City-St-Zip: NAPLES, FL 34109

Title: DVP (X) Change () Addition
Name: RUDONI, JIM
Address: 2731 CITRUS LAKE DR. #104
City-St-Zip: NAPLES, FL 34109

Title: DST (X) Change () Addition
Name: HEMANN, ROBERT
Address: 2870 CITRUS LAKE DR #101
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NOREEN MCGARRY

D/P

04/26/2005

Electronic Signature of Signing Officer or Director

Date