2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N31860

Entity Name: LAKESIDE VILLAS NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

3400 N. TAMIAMI TR. #302
NAPLES, FL 34104 US

New Principal Place of Business:

3400 N. TAMIAMI TR. #302
NAPLES, FL 34103 US

Current Mailing Address:

3400 N. TAMIAMI TR. #302
NAPLES, FL 34104 US

New Mailing Address:

3400 N. TAMIAMI TR. #302
NAPLES, FL 34103 US

FEI Number: 65-0127425 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GAFFNEY, KEVIN P
3400 N. TAMIAMI TR. #302
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

GAFFNEY, KEVIN P
3400 N. TAMIAMI TR. #302
NAPLES, FL 34103 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: KEVIN P. GAFFNEY 04/15/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: PATTERSON, JEANIE
Address: 7731 JIB LANE
City-St-Zip: NAPLES, FL 34109

Title: DP ( ) Delete
Name: SULLIVEN, LINDA
Address: 2519 SAILORS WAY
City-St-Zip: NAPLES, FL 34109

Title: DST ( ) Delete
Name: O'BRIAN, RITA
Address: 2502 SAILORS WAY
City-St-Zip: NAPLES, FL 34109

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: PATTERSON, JEANIE
Address: 7731 JIB LANE
City-St-Zip: NAPLES, FL 34109

Title: P (X) Change ( ) Addition
Name: SULLIVAN, LINDA
Address: 2517 SAILORS WAY
City-St-Zip: NAPLES, FL 34109

Title: T (X) Change ( ) Addition
Name: O'BRIEN, RITA
Address: 2502 SAILORS WAY
City-St-Zip: NAPLES, FL 34109

Title: S ( ) Change (X) Addition
Name: PORTA, MARY ELLEN
Address: 2515 SAILORS WAY
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Change (X) Addition
Name: STREET, JOHN
Address: 2522 SAILORS WAY
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: LINDA SULLIVAN P 04/15/2009
Electronic Signature of Signing Officer or Director Date