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

FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90259 034 ****61.25

DOCUMENT # N31860

1. Entity Name
LAKESIDE VILLAS NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~2073 J & C BLVD~~ ~~NAPLES FL 34109~~ US	PO BOX 110339 NAPLES FL 34108 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
4306 Arnold Ave.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Naples, FL	City & State
Zip: 34104 Country: US	Zip Country

4. FEI Number 65-0127425 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BEVERLY KUETER ~~2073 J & C BLVD~~ NAPLES FL ~~34109~~	Name Street Address (P.O. Box Number is Not Acceptable) 4306 Arnold Ave. City Naples, FL Zip Code 34104

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 _____
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT O'BRIEN, JOHN 2502 SAILORS WAY NAPLES FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP PAHL, CAROL 2501 SAILORS WAY NAPLES FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~FISCHER, NANCY~~ ~~2522 SAILORS WAY~~ ~~NAPLES FL~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D, S WOOD, KATHY 2511 SAILORS WAY NAPLES, FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~DVP~~ ~~CASTLE, CRAIG~~ ~~2506 SAILORS WAY~~ ~~NAPLES FL~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HERBER, Robert 2518 SAILORS WAY NAPLES, FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~DS~~ BOZO, RICHARD 2505 SAILORS WAY NAPLES FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D, VP	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: Carol Pahl SIGNATURE REQUIRED CAROL PAHL 4/28/03 239-263-2403