


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90072 014 ****61.25

DOCUMENT # N31862 1. Entity Name LAKESIDE PATIO HOMES NEIGHBORHOOD ASSOCIATION, INC.			
Principal Place of Business ADVANCED PROPERTY MGMT. 3350 WOODS EDGE CIRCLE, STE. 104 BONITA SPRINGS, FL 34134 US		Mailing Address 1035 COLLIER CENTER WAY SUITE 7 NAPLES, FL 34110 US	
2. Principal Place of Business - No P.O. Box # 1035 Collier Center Way		3. Mailing Address 1035 Collier Center Way	
Suite, Apt. #, etc. Suite 7		Suite, Apt. #, etc. Suite 7	
City & State Naples FL		City & State Naples FL	
Zip 34110		Zip 34110	
Country US		Country US	
4. FEI Number 65-0127433		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ADVANCED PROPERTY MGMT. SERVICE, INC 1035 COLLIER CENTER WAY SUITE 7 NAPLES, FL 34110		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 P NAME PHILIP, LISA STREET ADDRESS 2654 ART AVE CITY-ST-ZIP NAPLES, FL 34109	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME LANCASTER, RON STREET ADDRESS 7719 AHoy AVE CITY-ST-ZIP NAPLES, FL 34109	<input type="checkbox"/> Delete	TITLE D NAME Lancaster, Robert STREET ADDRESS 7719 Ahoy Ave. CITY-ST-ZIP Naples, FL 34109	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE ST NAME SMITH, JUDY STREET ADDRESS 2862 MIZZON WAY CITY-ST-ZIP NAPLES, FL 34109	<input type="checkbox"/> Delete	TITLE DST NAME Smith, Judy STREET ADDRESS 2862 Mizzon Way CITY-ST-ZIP Naples, FL 34109	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME READY, DAVID STREET ADDRESS 2857 MIZZON WAY CITY-ST-ZIP NAPLES, FL 34109	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME WOMELDORF, DON STREET ADDRESS 2665 AFT AVE CITY-ST-ZIP NAPLES, FL 34109	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME CORDIN, RUTH STREET ADDRESS 7714 AHoy AVE CITY-ST-ZIP NAPLES, FL 34109	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Lisa a Philip</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			
<small>Date Daytime Phone #</small>			