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FILED

Mar 03 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N36764 (1)

1. Corporation Name

LAKESIDE GARDENS HOMEOWNERS ASSN., INC.



Principal Place of Business

Mailing Address

212 LAKESIDE GARDENS  
LAKE WALES FL 33853-8735212 LAKESIDE GARDEN CIRCLE  
LAKE WALES FL 33853-8735  
US3. Date Incorporated or Qualified  
02/21/19903a. Date of Last Report  
03/27/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 212 Lakeside Garden Cir.

23 City &amp; State

27 City &amp; State

24 Zip

Country

28 Zip

Country

25

29 33853-8735

30 USA.

4. FEI Number  
59-3016300

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BADGER, ELIZABETH  
212 LAKESIDE GARDEN CIRCLE  
LAKE WALES FL 33853-8735

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503 Florida Statutes.

SIGNATURE

*Elizabeth Badger*

(NOTE: Registered Agent signature required when reinstating)

DATE

2-25-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D/P  
NAME HENCY, CLAUDIS  
STREET ADDRESS 231 LAKESIDE GARDEN CIRCLE  
CITY-ST-ZIP LAKE WALES FL 3385311 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIPTITLE VP  
NAME HASKELL, ROBERT  
STREET ADDRESS 89 LAKESIDE GARDEN CIRCLE  
CITY-ST-ZIP LAKE WALES FL 3385321 TITLE VP  
22 NAME John Holdman  
23 STREET ADDRESS 218 Sunshine Dr  
24 CITY-ST-ZIP Lake Wales, FL 33853TITLE S  
NAME MCQUEEN, NORMA  
STREET ADDRESS 199 LAKESIDE GARDEN CIRCLE  
CITY-ST-ZIP LAKE WALES FL 338533.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE D/T  
NAME BADGER, ELIZABETH  
STREET ADDRESS 212 LAKESIDE GARDEN CIRCLE  
CITY-ST-ZIP LAKE WALES FL 33853-87354.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE D  
NAME HOLDMAN, JOHN  
STREET ADDRESS 318 SUNSHINE DRIVE  
CITY-ST-ZIP LAKE WALES FL 338535.1 TITLE  
5.2 NAME Richard D. Badger  
5.3 STREET ADDRESS 212 Lakeside Garden Cir.  
5.4 CITY-ST-ZIP Lake Wales, FL 33853-8735TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Elizabeth Badger*

2-25-97

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CR2E037 (9/96)