

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000003283

1. Entity Name

LAKESIDE WOODS ASSOCIATION, INC.

FILED
Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90108 043 ****61.25

Principal Place of Business 1200 LAKESIDE WOODS DR. VENICE FL 34292 US	Mailing Address 1200 LAKESIDE WOODS DR. VENICE FL 34292-1464 US
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	Country
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3196187	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FOLEY, EDWARD 1260 LAKESIDE WOODS DR VENICE FL 34292	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE Edward Foley, Dir. Pres. Edward Foley 4/17/2000
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 Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FOLEY, EDWARD 1260 LAKESIDE WOODS DR VENICE FL 34292 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS POLK, NANCY 1285 LAKESIDE WOODS DR VENICE FL 34292 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BONAFIND, EDWARD 1264 LAKESIDE WOODS DR VENICE FL 34292 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Terry Miller 1273 Lakeside Woods Dr Venice, FL 34292 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ANDERSON, KUNO 1274 LAKESIDE WOODS DR VENICE FL 34292 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Valmore Langevin 1286 Lakeside Woods Dr Venice, FL 34292 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GROTE, GRACE 1267 LAKESIDE WOODS DR VENICE FL 34292 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Sally Lennhart 1266 Lakeside Woods Dr Venice, FL 34292 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: Valmore Langevin Valmore T Langevin, Treas. 4/17/00 941-485-5147
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)