

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000003283

1. Entity Name

LAKESIDE WOODS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1200 LAKESIDE WOODS DR.
VENICE FL 34292
US

1200 LAKESIDE WOODS DR.
VENICE FL 34292
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3196187

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

NASH, VERA
1271 LAKESIDE WOODS DR
VENICE FL 34292

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

City FL Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$81.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	DP President	☐ Delete
NAME	NASH, VERA	
STREET ADDRESS	1271 LAKESIDE WOODS DR	
CITY-ST-ZIP	VENICE FL 34292	
TITLE	DS Secretary	☐ Delete
NAME	HIGGINS, JOHN	
STREET ADDRESS	1275 LAKESIDE WOODS DR	
CITY-ST-ZIP	VENICE FL 34292	
TITLE	D Grounds Chairman	☐ Delete
NAME	MILLER, TERRY	
STREET ADDRESS	1273 LAKESIDE WOODS DR	
CITY-ST-ZIP	VENICE FL 34292	
TITLE	DT Treasurer	☐ Delete
NAME	LANGEVIN, VALMORE T	
STREET ADDRESS	1286 LAKESIDE WOODS DR	
CITY-ST-ZIP	VENICE FL 34292	
TITLE	DV Vice President	☒ Delete
NAME	LENHART, SALLY	
STREET ADDRESS	1266 LAKESIDE WOODS DR	
CITY-ST-ZIP	VENICE FL 34292	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President Pratt, Dana W	☐ Change ☒ Addition
NAME	1270 Lakeside Woods Dr	
STREET ADDRESS	Venice, FL 34292	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 T Langevin 314-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 11, 2002 8:00 am
Secretary of State

03-27-2002 90002 012 ****61.25

23556



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)