

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90060 010 ****61.25

DOCUMENT # N93000003283				Secretary of State 02-25-2004 90060 010 ****61.25			
1. Entity Name LAKE SIDE WOODS ASSOCIATION, INC.							
Principal Place of Business 1200 LAKE SIDE WOODS DR. VENICE, FL 34292 US		Mailing Address 1200 LAKE SIDE WOODS DR. VENICE, FL 34292 US		44013331			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01062004 Chg-NP CR2E037 (10/03)			
City & State		City & State		4. FEI Number 59-3196187		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NASH, VERA 1271 LAKE SIDE 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			
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)							
Filing Fee is \$81.25 Due by May 1, 2004		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	PD President + Director ☐ Delete			TITLE	☐ Change ☐ Addition		
NAME	NASH, VERA			NAME			
STREET ADDRESS	1271 LAKE SIDE WOODS DR			STREET ADDRESS			
CITY-ST-ZIP	VENICE, FL 34292			CITY-ST-ZIP			
TITLE	SD Secretary + Director ☐ Delete			TITLE	☐ Change ☐ Addition		
NAME	HIGGINS, JOHN			NAME			
STREET ADDRESS	1275 LAKE SIDE WOODS DR			STREET ADDRESS			
CITY-ST-ZIP	VENICE, FL 34292			CITY-ST-ZIP			
TITLE	GCD Grounds Chairman + Director ☒ Delete			TITLE	☐ Change ☒ Addition		
NAME	MILLER, TERRY			NAME	Grounds Chair many Director		
STREET ADDRESS	1273 LAKE SIDE WOODS DR			STREET ADDRESS	Jerome Vohas ka		
CITY-ST-ZIP	VENICE, FL 34292			CITY-ST-ZIP	1280 Lakeside Woods Dr		
TITLE	TD Treasurer + Director ☐ Delete			TITLE	☐ Change ☐ Addition		
NAME	LANGEVIN, VALMORE T			NAME			
STREET ADDRESS	1286 LAKE SIDE WOODS DR			STREET ADDRESS			
CITY-ST-ZIP	VENICE, FL 34292			CITY-ST-ZIP			
TITLE	VPD Vice President + Director ☐ Delete			TITLE	☐ Change ☒ Addition		
NAME	HUSTON, WILLIAM			NAME	Vice President + Director		
STREET ADDRESS	1276 LAKE SIDE WOODS DR.			STREET ADDRESS	John Cappa		
CITY-ST-ZIP	VENICE, FL 34292			CITY-ST-ZIP	1281 Lakeside Woods Dr		
TITLE	☐ Delete			TITLE	☐ Change ☐ Addition		
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				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: <u>Valmore T Langevin</u> Treasurer - 2004 941-485-5147							
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							
Date Daytime Phone #							