

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003283

FILED
Feb 25, 2009
Secretary of State

Entity Name: LAKESIDE WOODS ASSOCIATION, INC.

Current Principal Place of Business:

1200 LAKESIDE WOODS DR.
VENICE, FL 34292 US

New Principal Place of Business:

1200 LAKESIDE WOODS DR.
VENICE, FL 34285 US

Current Mailing Address:

1200 LAKESIDE WOODS DR.
VENICE, FL 34292 US

New Mailing Address:

1200 LAKESIDE WOODS DR.
VENICE, FL 34285 US

FEI Number: 59-3196187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLER, DELORES
1277 LAKESIDE WOODS DRIVE
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALLER, DELORES
Address: 1277 LAKESIDE WOODS DRIVE
City-St-Zip: VENICE, FL 34285

Title: SD () Delete
Name: GUYTON, MARJORIE
Address: 1272 LAKESIDE WOODS DRIVE
City-St-Zip: VENICE, FL 34285

Title: GCD () Delete
Name: YOUNG, BRIAN
Address: 1268 LAKESIDE WOODS DRIVE
City-St-Zip: VENICE, FL 34285

Title: TD () Delete
Name: LANGEVIN, VALMORE T
Address: 1286 LAKESIDE WOODS DR
City-St-Zip: VENICE, FL 34292

Title: VPD () Delete
Name: CHAMBERLIN, CYNTHIA
Address: 1283 LAKESIDE WOODS DR
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: GCD (X) Change () Addition
Name: YOUNG, BRIAN
Address: 1264 LAKESIDE WOODS DRIVE
City-St-Zip: VENICE, FL 34285

Title: TD (X) Change () Addition
Name: LANGEVIN, VALMORE T
Address: 1286 LAKESIDE WOODS DR
City-St-Zip: VENICE, FL 34285

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VALMORE T. LANGEVIN

TD

02/25/2009

Electronic Signature of Signing Officer or Director

Date