

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90093 016 ****70.00

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1. Corporation Name

LAKESIDE NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business

7628 N 56TH ST
STE 8
TAMPA FL 33617
US

Mailing Address

7628 N 56TH ST
STE 8
TAMPA FL 33617
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

04/19/1995

4. FEI Number

59-3314858

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

SPIVEY, WILLIAM C.
7628 N 56TH ST
STE 8
TAMPA FL 33617

10. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME LANDAUER, KATHERINE
STREET ADDRESS 9446 HUNTER'S POND DR
CITY-ST-ZIP TAMPA FL 33647

TITLE D
NAME HARTLEY, ALFRED H.
STREET ADDRESS 9448 HUNTER'S POND DR
CITY-ST-ZIP TAMPA FL 33647

TITLE D
NAME PRASAD, ANGELA
STREET ADDRESS 9470 HUNTER'S POND DR
CITY-ST-ZIP TAMPA FL 33647

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME LANDAUER, KATHERINE
1.3 STREET ADDRESS 9446 HUNTER'S POND DR
1.4 CITY-ST-ZIP TAMPA, FL 33647

2.1 TITLE VD
2.2 NAME HARTLEY, ALFRED H.
2.3 STREET ADDRESS 9448 HUNTER'S POND DR
2.4 CITY-ST-ZIP TAMPA, FL 33647

3.1 TITLE STD
3.2 NAME GEORGES, NURI
3.3 STREET ADDRESS 9423 HUNTER'S POND DR
3.4 CITY-ST-ZIP TAMPA, FL 33647

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: KATHERINE LANDAUER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/99

813-264-1706

Date

Daytime Phone #

CR2E037 (11/98)