

DOCUMENT # N97000001120

1. Entity Name

LAKESIDERS ASSOCIATION OF CLEARWATER, INC.

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90102 012 ****61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O DANIEL REPKA 2165 GULF TO BAY BLVD. #729 CLEARWATER FL 33765 US		Mailing Address ALFRED SPALLONE 2165 GULF TO BAY BLVD #1028 CLEARWATER FL 33765 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 59-2586731		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPALLONE, ALFRED 2165 GULF TO BAY BLVD #1028 CLEARWATER FL 33765		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.

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 \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SPALLONE, ALFRED 2165 GULF TO BAY BLVD #1028 CLEARWATER FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALEXANDER, NORMAN 2165 GULF TO BAY BLVD #825 CLEARWATER FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PLEASE, ROD 2165 GULF TO BAY BLVD #243 CLEARWATER FL 33765 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S YAHNE, MARILYN 2165 GULF TO BAY BLVD #742 CLEARWATER FL 33765 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WOOD, NANCY 2165 GULF TO BAY BLVD #744 CLEARWATER FL 33765 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR HICKS, HELEN 2165 GULF TO BAY BLVD. #1026 CLEARWATER FL 33765 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANC1, PHIL 2165 GULF TO BAY BLVD #932 CLEARWATER FL 33765 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINTER, KURT 2165 GULF TO BAY BLVD #543 CLEARWATER FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REPKA, DANIEL 2165 GULF TO BAY BLVD #729 CLEARWATER FL 33765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Daniel R. Repka DANIEL R. REPKA-PD 03/08/2002 (727) 462-2616
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)

Attachment # Doc #

N9700000012C

427347

FINANCIAL REPORT for PERIOD OF
January 1, 2001 to December 31, 2001

INCOME:

BEGINNING BALANCE, Jan. 1, 2001	\$ 797.58
INCOME FROM MEMBERSHIP	\$ 316.00
<u>INCOME FROM INTEREST</u>	<u>\$ 8.42</u>
TOTAL	\$1,122.00

EXPENSES:

2001 STATE FILING	\$ 61.25
SUPPLIES, COPIES, POSTAGE & <u>1/2 NEWSLETTERS</u>	<u>\$ 98.56</u>
TOTAL	\$ 159.81

NET BALANCE
CARRIED FORWARD

\$ 962.19

I certify that the above Financial Statement is
accurate and correct.

By Helen L. Hicks
Helen L. Hicks
Treasurer, 2001