

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004236

FILED
Jan 16, 2004
Secretary of State

Entity Name: THE LAKESIDE COMMUNITY RENEWAL, INC.

Current Principal Place of Business:

115 EAST MAIN ST.
PAHOKEE, FL 33476

New Principal Place of Business:

Current Mailing Address:

115 EAST MAIN ST.
PAHOKEE, FL 33476

New Mailing Address:

FEI Number: 65-0965997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JARRIEL, SHIRLEY L
115 EAST MAIN ST.
PAHOKEE, FL 33476

Name and Address of New Registered Agent:

BISING MARINE GROUP, INC.
P.O. BOX 563
PAHOKEE, FL 33476

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: GUY BISING

01/16/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JARRIEL, SHIRLEY L
Address: 1731 BACOM PT RD
City-St-Zip: PAHOKEE, FL 33476

Title: VD () Delete
Name: LAW, KEN
Address: 115 EAST MAIN ST.
City-St-Zip: PAHOKEE, FL 33476

Title: SD () Delete
Name: THOMPSON, ALICE
Address: 1029 BACOM POINT RD
City-St-Zip: PAHOKEE, FL 33476

Title: TD () Delete
Name: RABY, CYNTHIA
Address: 7TH STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BISING, GUY C
Address: 455 BACOM POINT ROAD
City-St-Zip: PAHOKEE, FL 33476

Title: V (X) Change () Addition
Name: POPE, LEWIS
Address: 1135 GARDEN PLACE
City-St-Zip: PAHOKEE, FL 33476

Title: S (X) Change () Addition
Name: O'CONNEL-RUST, ANN
Address: P.O. BOX 126
City-St-Zip: CANAL POINT, FL 33438

Title: T (X) Change () Addition
Name: THOMPSON, ALICE
Address: 2997 BACOM POINT ROAD, APT #8
City-St-Zip: PAHOKEE, FL 33476

Title: D () Change (X) Addition
Name: HONEYCUTT, EDWARD
Address: P.O. BOX 211
City-St-Zip: CANAL POINT, FL 33438

Title: D () Change (X) Addition
Name: TODD, FLORA
Address: 719 BACOM POINT ROAD
City-St-Zip: PAHOKEE, FL 33476

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GUY BISING

P

01/16/2004

Electronic Signature of Signing Officer or Director

Date