2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2009
Secretary of State

DOCUMENT# N99000004236

Entity Name: THE LAKESIDE COMMUNITY RENEWAL, INC.

Current Principal Place of Business:

115 EAST MAIN ST.
PAHOKEE, FL 33476 US

New Principal Place of Business:

Current Mailing Address:

115 EAST MAIN ST.
PAHOKEE, FL 33476 US

New Mailing Address:

FEI Number: 65-0965997 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PAHOKEE CHAMBER OF COMMERCE
115 E. MAIN STREET
PAHOKEE, FL 33476 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: P ( ) Delete
Name: TODD, FLORA MARY
Address: 137 E. MAIN ST
City-St-Zip: PAHOKEE, FL 33476 US

Title: V ( ) Delete
Name: THOMPSON, ALICE
Address: 2997 BACOM PT RD
City-St-Zip: PAHOKEE, FL 33476 US

Title: S ( ) Delete
Name: DOBROW, LEONARD
Address: 977 BACOM PT RD
City-St-Zip: PAHOKEE, FL 33476 US

Title: T ( ) Delete
Name: DOBROW, LEONARD
Address: 977 BACOM PT RD
City-St-Zip: PAHOKEE, FL 33476 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ALICE E. THOMPCON V 05/13/2009

Electronic Signature of Signing Officer or Director — Date