

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000002144

**FILED
Apr 07, 2007
Secretary of State**

Entity Name: 201 SOUTH LAKESIDE, INC.

Current Principal Place of Business:

3011 YAMATO RD
A-7
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

714 S ATLANTIC DR
LANTANA, FL 33462

New Mailing Address:

FEI Number: 20-3480174 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GERSTIN, JOSHUA ESQ
LAW OFFICES OF JOSHUA G. GERSTIN, P.A.
399 WEST PALMETTO PARK RD STE 108
BOCA RATON, FL 33432 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: WLODARSKI, WALDEMAR
Address: 714 S ATLANTIC DR
City-St-Zip: LANTANA, FL 33462

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V-CE () Change (X) Addition
Name: WLODARSKI, EMANUELA B
Address: 714 S ATLANTIC DR
City-St-Zip: LANTANA, FL 33462

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALDEMAR WLODARSKI

DPST

04/07/2007

Electronic Signature of Signing Officer or Director

_____ Date