2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P05000091874~

1. Entity Name

LAKESIDE INVESTMENT PROPERTIES, INC.



FILED Jan 29, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

303 WATERWOOD DRIVE YALAHA, FL 34797

303 WATERWOOD DRIVE YALAHA, FL 34797



01242007

No Chg-P

CR2E034 (11/05)

4. FEI Number 56-2520473 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZAHRADNIK, ROBERT J 303 WATERWOOD DRIVE YALAHA, FL 34797

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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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent eignature required when rematating) DATE					DATE
FILE NOW!!! FEE 18 \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financia Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZAHRADNIK, ROBERT J 303 WATERWOOD DRIVE YALAHA, FL 34797				
TITLE NAME STREET ADDRESS CITY-SI-ZIP	S ZAHRADNIK, CARRIE P 303 WATERWOOD DRIVE YALAHA, FL 34797				000000607631 01/31/07-80046-010 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ZAHRADNIK, CARRIE P 303 WATERWOOD DRIVE YALAHA, FL 34797			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-S1-ZIP					
NAME SIREET ADDRESS CITY-ST-ZIP		ŗ			

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert J. Zahradnik

1/25/07

352-324-3543

Daytime Phone #