

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000156164

FILED
Jan 13, 2009
Secretary of State

Entity Name: LAKESIDE REALTY OF LAKE PLACID, INC.

Current Principal Place of Business:

206 N MAIN AVE
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

PO BOX 2680
LAKE PLACID, FL 33862

New Mailing Address:

FEI Number: 20-3850753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINO, GREGORY S
515 N FLAGLER DRIVE 17TH FLOOR
WEST PALM BEACH, FL 33401 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: PD () Delete
Name: KINO, GREGORY S
Address: 515 N. FLAGLER DRIVE, 17TH FLOOR
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: PAMELA SMITH ARNONE
Address: P.O. BOX 2680
City-St-Zip: LAKE PLACID, FL 33862

Title: STD () Delete
Name: HODGE, LINDA
Address: P.O. BOX 2680
City-St-Zip: LAKE PLACID, FL 33862

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA HODGE

STD

01/13/2009

Electronic Signature of Signing Officer or Director

Date