FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT FLORIDA DEPARTMENTOF STATE FILED **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 JUN 15 AM 2: 59 DOCUMENT # P93000051194 (7) SECRETALLY UPSTATE TALLAHASSELL FLORIDA LAKESIDE WOODS DEVELOPMENT, INC. Principal Place of Business Mailing Address 200 CAPRI ISLES BLVD 200 CAPRI ISLES BLVD VENICE FL 34292 VENICE FL 34292 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/20/1993 2. Principal Place of Business 2a. Mailing Address Applied For 65-0425386 Not Applicable 21 26 Suite Apt #, etc. Suite, Apt. #, etc \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 25 29 30 24 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent **B1** Name PETERSON, DAVID E 200 CAPRI ISLES BLVD 82 Street Address (P.O. Box Number is Not Acceptable) VENICE FL 34292 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of requisiered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. 100002566541 -06/19/98--01113--004 DELETE TITLE 1.1 TITLE NAME PETERSON, DAVID E 1.2 NAME CR2E034 STREET ADDRESS 1545 WATERFORD DR 1.3 STREET ADDRESS ****150.00 ****150.00 VENICE FL CITY - ST - ZIP 1.4 CITY - ST - ZIP ☐ Change ☐ Addition DELETE TITLE 2.1 TITLE **PAULA CAITHNESS** 22 NAME NAME 1091 EISENHOWER DR STREET ADDRESS 2.3 STREET ADDRESS NOKOMIS FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE ☐ Change TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. C(1Y-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(6, Florida Statutes. I further certify that the information indicated on this annual report or supplienchal annual 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 12 or Block 13 if changes, or on an attachment with an address.

PHILIDE PETERSON

5-27-98

Department of Alate Annual Reports POBOX 1500 Tallahassee, Fl 32302-1500

Re: Annual Report Free

have enclosed 4 annual reports that are filed late. I have been in the hapital with heart surgery and did not file these reports on time. I would appreciate your not charging me late fees. Thank upon for your consideration.

Very truly yours,

Reporto Enclosed For:
Lohind Wood Development, she
Venice Island Sevelopment, Inc.
Nether Custom Homes, Inc.
Shahett Island H. O. asin, Inc.