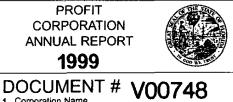
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999

LAKESIDE ESTATE SERVICES, INC.

1. Corporation Name



DIVISION OF CORPORATIONS

## FILED May 04, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State 05-04-1999 90175 033 \*\*\*150.00

|--|

Principal Place	of Business	Mailing Address			AN DIDIN DADAH DIDIN DID	II) Bibil IBUI
P.O. BOX 30021 P.O. BOX 30021 CLEVELAND OH 44130-0021 CLEVELAND OH 44130-002						
				DO NOT WRITE IN THIS SPACE		<del></del> 1
				3. Date Incorporated or Qualifed		
				12/16/1991		
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	<u> </u>	ied For
21		26		65-0321358		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	<b>\$8.75</b> Ad Fee Requ	
City & State	е	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to	• 1
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	,
24	25	29 30	0	Personal Property Tax.		No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registers	≥d Agent /	
			81 Name			
BLACKWOOD, DAVID A.			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
605 S.E. 10TH ST.						
POM	IPANO BEACH FL 33060		83			
			84 City		. 85 Zip Co	ode
			- "	F	'L	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	norized by the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its re pointment as regi	egistered stered
SIGNATURE						
0.0	Signature, typed or printed name of registered age		egistered Agent signature require			
12.		ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	P DANKED DANK III	□ becere	1.1 TITLE			
NAME	RANKER, PAUL H.		1.2 NAME			
STREET ADDRESS	14821 TIMBER LANE		13 STREET ADDRESS			
CITY-ST-ZIP	MIDDLEBURG HGHTS OH		1.4 CITY-ST-ZIP		Change	Addition
TITLE	S CAMPAGE CAMPAGE A C	D DELETE				
NAME	RANKER, SAMANTHA S		2.2 NAME			
STREET ADDRESS	14821 TIMBER LANE		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIDDLEBURG HGHTS OH	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change	Addition
TITLE		LJ OLLLIL	3.2 NAME			_
NAME			3.3 STREET ADDRESS			ļ
STREET ADDRESS			3.4. CITY-ST-ZIP			
CITY-ST-ZIP		DELETE	4.1 TITLE		Change	Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			i
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			8.3 STREET ADDRESS			ł
OWN OF THE			64 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 yiel 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 changed, or or any attachment with an address, with all other like empowered.

SIGNATURE: