

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # V00748

1. Entity Name
LAKESIDE ESTATE SERVICES, INC.



Principal Place of Business
**P.O. BOX 30021
CLEVELAND, OH 44130-0021**

Mailing Address
**P.O. BOX 30021
CLEVELAND, OH 44130-0021**



02272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0321358	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BLACKWOOD, VIRGINIA A
605 S.E. 10TH ST.
POMPANO BEACH, FL 33060**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RANKER, PAUL H.
STREET ADDRESS	14821 TIMBER LANE
CITY-STATE-ZIP	MIDDLEBURG HGHTS, OH

TITLE	S
NAME	WELSH, SAMANTHA S
STREET ADDRESS	315 WALMAR
CITY-STATE-ZIP	BAY VILLAGE, OH 44140

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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CITY-STATE-ZIP	

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05/15/07-80063-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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: Paul H. Ranker **PAUL H. RANKER, PRESIDENT** **04-21-2007**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #