2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2017
Secretary of State
CC3293138207

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Entity Name: LAKESHORE VILLAGE SOUTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5310 CLARK ROAD, SUITE 207
SARASOTA, FL 34233

Current Mailing Address:

5310 CLARK ROAD, SUITE 207
SARASOTA, FL 34233 US

FEI Number: 59-2177675

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TROYER, VIRGINIA
5310 CLARK ROAD, SUITE 207
SARASOTA, FL 34233 US

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: VIRGINIA TROYER 03/16/2017

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	TROYER, VIRGINIA
Address	5310 CLARK ROAD, SUITE 207
City-State-Zip:	SARASOTA FL 34233

Title	VP, DIRECTOR
Name	CASHMAN, LOUISE
Address	5310 CLARK ROAD, SUITE 207
City-State-Zip:	SARASOTA FL 34233

Title	DIRECTOR
Name	WALTERS, MIKE
Address	5310 CLARK ROAD, SUITE 207
City-State-Zip:	SARASOTA FL 34233

Title	SECRETARY, DIRECTOR
Name	DOWNARD, LEW
Address	5310 CLARK ROAD, SUITE 207
City-State-Zip:	SARASOTA FL 34233

Title	TREASURER
Name	GLENN, ROBERT
Address	5310 CLARK ROAD, SUITE 207
City-State-Zip:	SARASOTA FL 34233

Title	ASST. SECRETARY
Name	BURNETT, CLIVE
Address	5310 CLARK ROAD, SUITE 207
City-State-Zip:	SARASOTA FL 34233

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CLIVE BURNETT ASST SEC 03/16/2017

Electronic Signature of Signing Officer/Director Detail — Date