

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000002226

**Entity Name:** LAKESIDE VILLAGE OF DAVIE PROPERTY OWNER'S ASSOCIATION, INC.

**FILED**  
**Jan 26, 2021**  
**Secretary of State**  
**4573345756CC**

**Current Principal Place of Business:**

1079 SHOTGUN RD  
SUNRISE, FL 33326

**Current Mailing Address:**

1079 SHOTGUN RD  
SUNRISE, FL 33326 US

**FEI Number: 30-0300433**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

STRALEY & OTTO, P.A.  
2699 STIRLING ROAD  
C-207  
FORT LAUDERDALE, FL 33312 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: CHARLES F. OTTO, ESQ.**

**01/26/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	VP
Name	VAUGHN, CASSANDRA	Name	MALLAK, SUE
Address	1079 SHOTGUN RD	Address	1079 SHOTGUN RD
City-State-Zip:	SUNRISE FL 33326	City-State-Zip:	SUNRISE FL 33326
Title	SECRETARY, TREASURER		
Name	CHIARELLI, CHRISTIAN		
Address	1079 SHOTGUN RD		
City-State-Zip:	SUNRISE FL 33326		

*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: CASSANDRA VAUGHN**

**PRESIDENT**

**01/26/2021**

Electronic Signature of Signing Officer/Director Detail

Date