

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000006157

Entity Name: LAKESIDE WOODS SOUTH ASSOCIATION, INC.**Current Principal Place of Business:**1100 SOUTHLAKE CT
VENICE, FL 34285**Current Mailing Address:**1100 SOUTHLAKE CT
VENICE, FL 34285 US**FEI Number:** 65-0679906**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FOSTER, JOSEPH
1180 SOUTHLAKE CT
VENICE, FL 34285 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	HUBAI, PAUL
Address	1125 SOUTHLAKE CT
City-State-Zip:	VENICE FL 34285

Title	P
Name	FOSTER, JOSEPH
Address	1180 SOUTHLAKE CT
City-State-Zip:	VENICE FL 34285

Title	T
Name	LEINWEAVER, ROBERT
Address	1109 SOUTHLAKE CT
City-State-Zip:	VENICE FL 34285

Title	D
Name	STRAITT-CHATTERTON, FRANCINE
Address	1114 SOUTHLAKE CT
City-State-Zip:	VENICE FL 34285

Title	D
Name	DENLER, ROBERT
Address	1102 SOUTHLAKE CT
City-State-Zip:	VENICE FL 34285

Title	D
Name	BORIO, MARY K
Address	1149 SOUTHLAKE CT
City-State-Zip:	VENICE FL 34285

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: ROBERT LEINWEAVER**TREASURER****02/06/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date