

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30155

Entity Name: LAKESIDE CLUB, INC.**Current Principal Place of Business:**LAKESIDE CLUB, INC.
6100 TOUCAN DR.
ENGLEWOOD, FL 34224**Current Mailing Address:**LAKESIDE CLUB, INC.
6100 TOUCAN DR.
ENGLEWOOD, FL 34224 US**FEI Number:** 65-0097472**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**COGSWELL, EDWARD
6168 IVORYBILL DRIVE
ENGLEWOOD, FL 34224 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:** EDWARD COGSWELL

02/06/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SERGEANT, TANYA
Address 8455 TANAKA DR
City-State-Zip: ENGLEWOOD FL 34224

Title PRESIDENT
Name LAROCK, ROBERT
Address 6185 TERN DR.
City-State-Zip: ENGLEWOOD FL 34224

Title SECRETARY
Name COGSWELL, EDWARD
Address 6168 IVORYBILL DRIVE
City-State-Zip: ENGLEWOOD FL 34224

Title VP
Name WALKER, SONIA
Address 6019 SHEARWATER DR
City-State-Zip: ENGLEWOOD FL 34224

Title TREASURER
Name KELLERHALS, WILLIAM
Address 6058 SHEARWATER DR
City-State-Zip: ENGLEWOOD FL 34224

Title DIRECTOR
Name CATRON, WILLARD
Address 6192 TERN DR
City-State-Zip: ENGLEWOOD FL 34224

Title DIRECTOR
Name WYKES, DAVID
Address 8460 BUTTONQUAIL DR
City-State-Zip: ENGLEWOOD FL 34224

Title DIRECTOR
Name WILLOUGHBY, ROBERT
Address 8472 NIGHTHAWK DR
City-State-Zip: ENGLEWOOD FL 34224

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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: WILLIAM KELLERHALS

TREASURER

02/06/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	PELLAND, BRIAN
Address	8461 KINGLET DR
City-State-Zip:	ENGLEWOOD FL 34224