2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2019
Secretary of State
3348581311CC

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Entity Name: LAKESIDE RANCH INVESTMENT CORPORATION

Current Principal Place of Business:

400 LAKESIDE RANCH CIR
WINTER HAVEN, FL 33881

Current Mailing Address:

400 LAKESIDE RANCH CIR
WINTER HAVEN, FL 33881 US

FEI Number: 59-2286724

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLEN, J. BART
141 5TH ST, NW
WINTER HAVEN, FL 33881 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	P
Name	FORMOLO, PAUL
Address	400 LAKESIDE RANCH CIR
City-State-Zip:	WINTER HAVEN FL 33881

Title	SECRETARY
Name	BARNARD, DAYLE
Address	400 LAKESIDE RANCH CIRCLE
City-State-Zip:	WINTER HAVEN FL 33881

Title	1ST VP
Name	ELKINS, MERLE
Address	400 LAKESIDE RANCH CIRCLE
City-State-Zip:	WINTER HAVEN FL 33881

Title	DIRECTOR
Name	HARRINGTON, JIM
Address	400 LAKESIDE RANCH CIR
City-State-Zip:	WINTER HAVEN FL 33881

Title	TREASURER
Name	HAYCRAFT, PEGGY
Address	400 LAKESIDE RANCH CIR
City-State-Zip:	WINTER HAVEN FL 33881

Title	DIRECTOR
Name	FUNFSINN, KEN
Address	400 LAKESIDE RANCH CIR
City-State-Zip:	WINTER HAVEN FL 33881

Title	2ND VP
Name	HOLDEN, LARRY
Address	400 LAKESIDE RANCH CIR
City-State-Zip:	WINTER HAVEN FL 33881

Title	DIRECTOR
Name	SIMON, AL
Address	400 LAKESIDE RANCH CIR
City-State-Zip:	WINTER HAVEN FL 33881

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

SIGNATURE: PAUL FORMOLO PRESIDENT 03/27/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SEIDENSTICKER, BOB
Address	400 LAKESIDE RANCH CIR
City-State-Zip:	WINTER HAVEN FL 33881