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: ANGELA ALLEN

Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# P07000018849

Entity Name: LAKESIDE HOMES, INC.

Current Principal Place of Business:

3413 SW RONALD ST PORT SAINT LUCIE. FL 34953

Current Mailing Address:

3413 SW RONALD ST PORT SAINT LUCIE. FL 34953

FEI Number: 20-8460916

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

RITTER, DARRYL 3413 SW RONALD ST PORT SAINT LUCIE, FL 34953 US

SIGNATURE:

Officer/Director Detail : DP Title Title DV Name RITTER, DARRYL Name ALLEN, ANGELA Address 3413 SW RONALD ST Address 3413 SW RONALD ST City-State-Zip: PORT SAINT LUCIE FL 34953

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.

FILED Apr 08, 2014 Secretary of State CC5362022488

Date

Certificate of Status Desired: No

City-State-Zip: PORT SAINT LUCIE FL 34953

> 04/08/2014 Date

DV