

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000086267

**Entity Name:** SHOPPES OF LAKESIDE, INC.

**Current Principal Place of Business:**

2440 MAYPORT RD.  
#7  
JACKSONVILLE, FL 32233

**Current Mailing Address:**

P O BOX 330046  
ATLANTIC BEACH, FL 32233 US

**FEI Number: 59-3212975**

**Certificate of Status Desired:** No

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

JACOBS, SYLVIA  
2440 MAYPORT RD.  
#7  
JACKSONVILLE, FL 32233 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:** SYLVIA JACOBS

03/20/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PTSD  
Name HIONIDES, CHRIS  
Address 2240 MAYPORT RD.#7  
City-State-Zip: JACKSONVILLE FL 32233

*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:** CHRIS HIONIDES

PRESIDENT

03/20/2020

Electronic Signature of Signing Officer/Director Detail

Date