

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119668

Entity Name: LAKESIDE CROSSING, LLC**Current Principal Place of Business:**1940 RAINBOW DRIVE
CLEARWATER, FL 33765**Current Mailing Address:**1940 RAINBOW DRIVE
CLEARWATER, FL 33765**FEI Number:** 20-8086338**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARLTON, ROSALYN
675 SOUTH GULFVIEW BLVD. #204
CLEARWATER, FL 33767 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**Authorized Person(s) Detail :**

Title	MGRM
Name	BATDORF, CHARLES
Address	1940 RAINBOW DRIVE
City-State-Zip:	CLEARWATER FL 33765

Title	MGRM
Name	BATDORF, LINDA
Address	1940 RAINBOW DRIVE
City-State-Zip:	CLEARWATER FL 33765

Title	MGRM
Name	KULE, RONALD
Address	420 LOTUS PATH
City-State-Zip:	CLEARWATER FL 33756

Title	MGRM
Name	KULE, SHERRY
Address	420 LOTUS PATH
City-State-Zip:	CLEARWATER FL 33756

Title	MGRM
Name	CARLTON, ROSALYN
Address	675 SOUTH GULFVIEW BLVD. #204
City-State-Zip:	CLEARWATER FL 33767

Title	MGRM
Name	SPAGNOLA, JOHN
Address	675 SOUTH GULFVIEW BLVD. #204
City-State-Zip:	CLEARWATER FL 33767

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES BATDORF

MGRM

01/13/2015

Electronic Signature of Signing Authorized Person(s) Detail_____
Date