

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712273

FILED  
Feb 18, 2009  
Secretary of State

Entity Name: LEISURE LAKES HOME OWNERS CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

P.O. BOX 3273  
LAKE PLACID, FL 33862 US

**New Principal Place of Business:**

10 CLUB HOUSE RD.  
LAKE PLACID, FL 33852 US

**Current Mailing Address:**

P.O. BOX 3273  
LAKE PLACID, FL 33862 US

**New Mailing Address:**

FEI Number: 59-2878143      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

REANEY, RICHARD  
3008 ASH ST  
LAKE PLACID, FL 33852 US

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

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

**OFFICERS AND DIRECTORS:**

Title: T      ( ) Delete  
Name: REESE, TERRY  
Address: 3046 MORNING GLORY DRIVE  
City-St-Zip: LAKE PLACID, FL 33852

Title: D      ( ) Delete  
Name: BLOVKSY, JOHN  
Address: 1012 PEACHTREE DRIVE  
City-St-Zip: LAKE PLACID, FL 33852

Title: P      ( ) Delete  
Name: REANEY, RICHARD  
Address: 3008 ASH ST  
City-St-Zip: LAKE PLACID, FL 33852

Title: D      ( ) Delete  
Name: REANEY, NANCY  
Address: 3008 ASH STREET  
City-St-Zip: LAKE PLACID, FL 33852

Title: V      ( ) Delete  
Name: REESE, GENE  
Address: 3046 MORNING GLORY DR.  
City-St-Zip: LAKE PLACID, FL 33852

Title: S      ( ) Delete  
Name: KIRK, GENNY  
Address: 3020 MORNING GLORY DR.  
City-St-Zip: LAKE PLACID, FL 33852

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD REANEY

P

02/18/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date