

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # 712863**

1. Entity Name  
**LEISUREVILLE COMMUNITY ASSOCIATION, INC.**



Principal Place of Business  
2921 W. GOLF BLVD.  
POMPANO BEACH, FL 33064

Mailing Address  
2921 W. GOLF BLVD.  
POMPANO BEACH, FL 33064

FILED  
07 APR 30 PM 3:43  
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

01092007 Chg-NP CR2E037 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number  
59-1269487

Applied For  
Not Applicable

City & State

City & State

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**POLIAKOFF, GARY A J.D.  
BECKER & POLIAKOFF, P.A.  
3111 STIRLING ROAD  
FT. LAUDERDALE, FL 33312**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2007

9. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD  
NAME: HEUSER, JAMES  Delete  
STREET ADDRESS: 2431 N CYPRESS ROAD  
CITY-ST-ZIP: POMPANO BEACH, FL 33064

TITLE: SD  Change  Addition  
NAME: Heuser, James SD  
STREET ADDRESS: 2431 N Cypress Road  
CITY-ST-ZIP: Pompano Beach, FL 33064

TITLE: DV  Delete  
NAME: AVERY, EDWIN  
STREET ADDRESS: 2701 E GOLF BLVD #1013  
CITY-ST-ZIP: POMPANO BCH, FL 33064

TITLE: PD  Change  Addition  
NAME: Avery, Edwin PD  
STREET ADDRESS: 2701 E. Golf Blvd. #1013  
CITY-ST-ZIP: Pompano Beach, FL 33064

TITLE: TD  Delete  
NAME: LOUANIS, GUILD  
STREET ADDRESS: 140 NW 29TH STREET  
CITY-ST-ZIP: POMPANO BEACH, FL 33064

TITLE:  Change  Addition  
NAME: 000103009520  
STREET ADDRESS: 05/22/07--01021--001  
CITY-ST-ZIP: \*\*980.00

TITLE: SD  Delete  
NAME: WEISE, MARGARET  
STREET ADDRESS: 170 NW 24TH COURTH  
CITY-ST-ZIP: POMPANO BEACH, FL 33064

TITLE: D  Change  Addition  
NAME: Weise, Margaret D  
STREET ADDRESS: 170 NW 24th Court  
CITY-ST-ZIP: Pompano Beach, FL 33064

TITLE: D  Delete  
NAME: ADELMAN, SANDRA  
STREET ADDRESS: 3050 NW 1ST DRIVE  
CITY-ST-ZIP: POMPANO BEACH, FL 33064

TITLE: VD  Change  Addition  
NAME: Gooss, Egon VD  
STREET ADDRESS: 301 Leisure Blvd.  
CITY-ST-ZIP: Pompano Beach, FL 33064

TITLE: D  Delete  
NAME: ANDERSON, CHARLES  
STREET ADDRESS: 2501 W GOLF BLVD #131  
CITY-ST-ZIP: POMPANO BEACH, FL 33064

TITLE: D  Change  Addition  
NAME: Luciano, George D  
STREET ADDRESS: 3131 E. Golf Blvd.  
CITY-ST-ZIP: Pompano Beach, FL 33064

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**EGON H. GOOSS**

SIGNATURE:

*Egon H. Gooss*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **4-6-07** Daytime Phone # **954-782-9587**