

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712863

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: LEISUREVILLE COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

2921 W. GOLF BLVD.  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

2921 W. GOLF BLVD.  
POMPANO BEACH, FL 33064

**New Mailing Address:**

FEI Number: 59-1269487      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCHNER, LARRY E  
LAW OFFICES OF LARRY E. SCHNER, PA  
750 SOUTH DIXIE HIGHWAY  
BOCA RATON, FL 33432 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: D ( ) Delete  
Name: HEUSER, JAMES  
Address: 2431 N CYPRESS ROAD  
City-St-Zip: POMPANO BEACH, FL 33064

Title: PD ( ) Delete  
Name: ANDERSON, CHARLES E III  
Address: 2501 W GOLF BLVD #131  
City-St-Zip: POMPANO BCH, FL 33064

Title: TD ( ) Delete  
Name: CARTANZA, ALFRED  
Address: 2910 NW 2 AVE  
City-St-Zip: POMPANO BEACH, FL 33064

Title: SD ( ) Delete  
Name: MARKER, JANICE  
Address: 2475 W GOLF BLVD #143  
City-St-Zip: POMPANO BEACH, FL 33064

Title: DV ( ) Delete  
Name: GOOSS, EGON  
Address: 301 LEISURE BLVD  
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Delete  
Name: HOLMES, MICHAEL  
Address: 251 S GOLF BLVD #292  
City-St-Zip: POMPANO BEACH, FL 33064

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

Title: VD (X) Change ( ) Addition  
Name: LUCIANO, GEORGE  
Address: 3131 E GOLF BLVD  
City-St-Zip: POMPANO BEACH, FL 33064

Title: D (X) Change ( ) Addition  
Name: WOOD, JOAN  
Address: 2700 W GOLF BLVD #248  
City-St-Zip: POMPANO BCH, FL 33064

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

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

Title: PD (X) Change ( ) Addition  
Name: GOOSS, EGON  
Address: 301 LEISURE BLVD  
City-St-Zip: POMPANO BEACH, FL 33064

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: EGON GOOSS

PD

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date