

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 22 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 713534 (6)
1. Corporation Name
NORTH LEISURE GARDENS ASSOCIATIONS, INC.



Principal Place of Business 1461 SO. OCEAN BOULEVARD POMPANO BEACH FL 33062	Mailing Address 1461 SO. OCEAN BOULEVARD POMPANO BEACH FL 33062-7380
---	--

3. Date Incorporated or Qualified 10/26/1967	3a. Date of Last Report 04/12/1996
---	---------------------------------------

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country 29	4. FEI Number 59-1258419	Applied For Not Applicable
--	--	-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
BRUCE J KINNEE
1461 O OCEAN BLVD., #112
POMPANO BEACH FL 33062

10. Name and Address of New Registered Agent
81 Name
PHYLLIS E. GUNN
82 Street Address (P.O. Box Number is Not Acceptable)
1461 S.OCEAN BLVD.#325
83
POMPANO BEACH, FL 33062
84 City
POMPANO BEACH, FL
85 Zip Code
33062

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: PHYLLIS E. GUNN, DIRECTOR
Phyllis E. Gunn
DATE: 4/12/97

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	AL BELL	
STREET ADDRESS	1461 S OCEAN BLVD	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	YOLANDA ROMEO	
STREET ADDRESS	1461 S OCEAN BLVD, #129	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	RUDOLF SCHALDO	
STREET ADDRESS	1461 S. OCEAN BLVD, #317	
CITY-ST-ZIP	POPANO BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ADELMAN, DORIS	
STREET ADDRESS	1461 S OCEAN BLVD 314	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	KINNEE, BRUCE J.	
STREET ADDRESS	1461 S. OCEAN BLVD. APT. 112	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	S
3.3 STREET ADDRESS	ANNE SMITH
3.4 CITY-ST-ZIP	1461 S.OCEAN BLVD.#328 POMPANO BEACH, FL 33062
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	V
4.3 STREET ADDRESS	DORIS ADELMAN
4.4 CITY-ST-ZIP	1461 S.OCEAN BLVD.#314 POMPANO BEACH, FL 33062
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	D
6.3 STREET ADDRESS	PHYLLIS E.GUNN
6.4 CITY-ST-ZIP	1461 S.OCEAN BLVD.#325 POMPANO BEACH, FL 33062

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: PHYLLIS E. GUNN *Phyllis E. Gunn* 4/12/97 954-9428386
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0021812

CP2E037 (9/96)

North Leisure Gardens Association, Inc

1461 South Ocean Boulevard
Pompano Beach, Florida 33062

Telephone (954) 942-8388

Officers

Albert J. Bell, President
Doris Adelman, Vice-President
Yolanda Romeo, Treasurer
Anne Smith, Secretary

Board Members

Phyllis Gunn
Dominick Iavarone
Bruce J. Kinnee
Vern Richardson
DENNIS HOLLOWS

ADDITIONAL DIRECTORS

D

DENNIS HOLLOWS
1461 S.OCEAN BLVD. #209
POMPANO BEACH, FL 33062

D

DOMINIC IAVARONE
1461 S.OCEAN BLVD. #114
POMPANO BEACH, FL 33062

D

VERN RICHARDSON
1461 S.OCEAN BLVD.#205
POMPANO BEACH, FL 33062