

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 714546

1. Entity Name
LEISUREVILLE FAIRWAY THREE ASSOCIATION, INC.



Principal Place of Business
**2800 WEST GOLF BLVD.
POMPAÑO BEACH, FL 33064**

Mailing Address
**2800 WEST GOLF BLVD.
POMPAÑO BEACH, FL 33064**

FILED
07 APR 30 PM 3:44

FLA. DEPT. OF STATE
TALLAHASSEE, FLORIDA



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03092007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1966166

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**POLIAKOFF, GARY A
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
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
WILLIS, FREDERICK J JR
2800 W GOLF BLVD #123
POMPAÑO BEACH, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
**600103009496
05/22/07--01021--001 **980.00**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
CUSTEAU, GILLES
2800 WEST GOLF BLVD. #221
POMPAÑO BEACH, FL 33064 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Rothen, Gunther PD ☒ Change ☐ Addition
**2800 W. Golf Blvd. #226
Pompano Beach, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
KOHL, PATRICIA
2800 W GOLF BLVD, #120
POMPAÑO BEACH, FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
McCloud, marge SD ☒ Change ☐ Addition
**2800 W. Golf Blvd #122
Pompano Beach, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
ROTHEN, GUNTHER J
2800 W. GOLF BLVD. #226
POMPAÑO BEACH, FL ☐ Delete **83518**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MERTZ, BERNICE M
2800 W GOLF BLVD #127
POMPAÑO BEACH, FL 33064 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
MCCLOUD, KEITH A
2800 W GOLF BLVD, #122
POMPAÑO BEACH, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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.

SIGNATURE:

Gunther J. Rothen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03.13.07
Date Daytime Phone # **781-2590**