

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715006

FILED
Apr 21, 2009
Secretary of State

Entity Name: LEISUREVILLE FAIRWAY ELEVEN ASSOCIATION, INC.

Current Principal Place of Business:

2701 EAST GOLF BLVD.
POMPANO BEACH, FL 330643700

New Principal Place of Business:

Current Mailing Address:

2701 E GOLF BLVD
#1017
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 59-1970441 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
250 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: STD () Delete
Name: BROWN, SUSAN B
Address: 2701 E. GOLF BLVD. #1014
City-St-Zip: POMPANO BCH, FL

Title: PD () Delete
Name: QUIGLEY, BONITA
Address: 2701 E GOLF BLVD #1017
City-St-Zip: POMPANO BEACH, FL 33064

Title: VD () Delete
Name: GRAHAM, EARL
Address: 2701 E GOLF BLVD #2017
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: MCLOUGHLIN, PATT
Address: 2701 EAST GOLF BLVD. #2014
City-St-Zip: POMPANO BEACH, FL 330643700

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: BROWN, SUSAN
Address: 2701 E. GOLF BLVD. #1014
City-St-Zip: POMPANO BCH, FL

Title: PD (X) Change () Addition
Name: SHAVE, ANNA
Address: 2701 E GOLF BLVD #2011
City-St-Zip: POMPANO BEACH, FL 33064

Title: VD (X) Change () Addition
Name: MCLOUGHLIN, PATT
Address: 2701 E GOLF BLVD #2014
City-St-Zip: POMPANO BEACH, FL 33064

Title: D (X) Change () Addition
Name: GRAHAM, EARL
Address: 2701 EAST GOLF BLVD. #2017
City-St-Zip: POMPANO BEACH, FL 330643700

Title: D () Change (X) Addition
Name: LAFLAMME, CLAUDE
Address: 2701 E GOLF BLVD #1016
City-St-Zip: POMPANO BEACH, FL 33064

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: ANNA SHAVE

PD

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date