

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715161

FILED
Apr 03, 2012
Secretary of State

Entity Name: LEISURE TOWERS ASSOCIATION, INC.

Current Principal Place of Business:

1500 S. OCEAN BLVD.
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

1500 S. OCEAN BLVD.
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 59-1298030

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMER, BERNADETTE
C/O LEISURE TOWERS OFFICE
1500 SOUTH OCEAN BLVD
POMPANO BEACH, FL 33062 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: VP,D
Name: SALERNO, RAMO
Address: 21034 RYAN ROAD
City-St-Zip: WARREN, MI 48091

Title: T,D
Name: ROSSELLE, ROBERT
Address: 1500 S. OCEAN BLVD, #905
City-St-Zip: POMPANO BEACH, FL 33062

Title: P,D
Name: CONDRA, GARY
Address: 1500 S. OCEAN BLVD, #208
City-St-Zip: POMPANO BEACH, FL 33062

Title: D
Name: GUZMAN, FRED
Address: 1500 S. OCEAN BLVD. #103
City-St-Zip: POMPANO BCH, FL 33062

Title: S,D
Name: MCCAMPBELL, MARYANN
Address: 1500 S. OCEAN BLVD. #602
City-St-Zip: POMPANO BEACH, FL 33062

Title: D
Name: BARATTA, VENUS
Address: 1500 S. OCEAN BLVD. #1201
City-St-Zip: POMPANO BEACH, FL 33062

I hereby 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 all other like empowered.

SIGNATURE: GARY CONDRA

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04/03/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date