2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2005 08:00 AM
Secretary of State

DOCUMENT # 715782

1. Entity Name
LEISURE HOUSE ASSOCIATION, INC.

Principal Place of Business
3000 RIO MAR STREET
FT. LAUDERDALE, FL 33304

Mailing Address
3000 RIO MAR STREET
FT. LAUDERDALE, FL 33304

01032005 No Chg-NP CR2E037 (10/03)

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4. FEI Number 59-1356509 — Applied For / Not Applicable

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

6. *Name and Address of Current Registered Agent*

RUMIN, EDWARD R.
2870 E. OAKLAND PARK BLVD.
FORT LAUDERDALE, FL 33306

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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, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CLARKE, DAVID
STREET ADDRESS	3000 RIO MAR ST
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	TD
NAME	TEIXEIRA, MARY
STREET ADDRESS	3000 RIO MAR ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	ST
NAME	STALKER, MURIEL
STREET ADDRESS	3000 RIO MAR ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	D
NAME	SMITH, MARY ANN
STREET ADDRESS	3000 RIO MAR ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	VD
NAME	DE CASTILLA, JOSE
STREET ADDRESS	3000 RIO MAR ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	PD
NAME	HICKEY, F JOHN
STREET ADDRESS	3000 RIO MAR ST
CITY-ST-ZIP	FT LAUDERDALE, FL

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02/24/05-80019-021 61.25

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12. I 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 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: F. John Hickey — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 2/22/05 Date — 954-564-4950 Daytime Phone #