

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719229

FILED
Feb 26, 2009
Secretary of State

Entity Name: LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1118 LAKE TERRACE
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

1118 LAKE TERRACE
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 59-1446292 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

M.J. GALLUP, ACCOUNTING & MANAGEMENT
817 GEORGE BUSH BLVD
DELRAY BEACH, FL 33483 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 () Delete
Name: GEISEKING, GERHARD
Address: 1118 LAKE TERRACE 108
City-St-Zip: BOYNTON BEACH, FL 33426

Title: ST () Delete
Name: ROEBER, GRAYCE C
Address: 1118 LAKE TERRACE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: BARB, HANSEN
Address: 1118 LAKE TERRACE 110
City-St-Zip: BOYNTON BEACH, FL 33426

Title: P () Delete
Name: MOOAR, RICHARD
Address: 1118 LAKE TERRACE 217
City-St-Zip: BOYNTON BEACH, FL 33426

Title: T () Delete
Name: HAGADORN, JOHN L
Address: 1118 LAKE TERR 112
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D (X) Delete
Name: BILL, ELSNER
Address: 1118 LAKE TERRACE 205
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: ROEBER, GRAYCE C
Address: 1118 LAKE TERRACE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN L. HAGADORN

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02/26/2009

Electronic Signature of Signing Officer or Director

_____ Date