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FILED

May 20 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 747112 (1)

1. Corporation Name

LEISUREVILLE LAKE UNIT O CONDOMINIUM ASSOCIATION
INC.

Principal Place of Business

C/O 1804 OCEAN DR
BOYNTON BCH FL 33426

Mailing Address

C/O 1804 OCEAN DR
BOYNTON BCH FL 33426

3. Date Incorporated or Qualified
05/08/1979

3a. Date of Last Report
03/13/1996

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

Country

4. FEI Number
59-1911120

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

H JOHN KRUTHOF
1804 OCEAN DRIVE APT 109
BOYNTON BCH FL 33426

10. Name and Address of New Registered Agent

61 Name

MARVIN ANDERSON

62 Street Address (P.O. Box Number is Not Acceptable)

1804 Ocean Drive # 112

63

Boynton Beach, FL 33426

64 City

FL

65 Zip Code

33426

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ANDERSON, MARVIN
STREET ADDRESS 1804 OCEAN DR #112
CITY-ST-ZIP BOYNTON BCH, FL 00000 ☐ DELETE

TITLE TD
NAME GUDMUNDSON, DORIS
STREET ADDRESS 1206 SW 22ND STREET
CITY-ST-ZIP BOYNTON BCH, FL 00000 ☐ DELETE

TITLE SD
NAME KRUTHOF, JOHN H
STREET ADDRESS 1804 OCEAN DR, APT. 109
CITY-ST-ZIP BOYNTON BCH, FL 00000 ☒ DELETE

TITLE D
NAME ROBY, HAROLD
STREET ADDRESS 1804 OCEAN DRIVE #108
CITY-ST-ZIP BOYNTON BEACH FL ☐ DELETE

TITLE D
NAME READING, EDWARD
STREET ADDRESS 1804 OCEAN DRIVE #108
CITY-ST-ZIP BOYNTON BEACH FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DORIS A. GUDMUNDSON

4-21-97 561-734-3423

CR2E037 (9/96)