2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 25, 2005 8:00 am Secretary of State

02-25-2005 90156 040 ****61.25

DOCL	IMF	TM	#7	19224

1. Entity Name LEISUREVILLE LAKE UNIT G CONDOMINIUM ASSOCIATION, INC.



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ASSOCIATION INC AS 1116 LAKE TER 11		ASSO 1116	Mailing Address Association inc 1116 Lake Ter Boynton Beach, Fl. 33426-4229			50019300							
Principal Place of Business 3. Mailing A			ing Address	g Address									
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.			02222005	Chg-NP	CR2E	037 (10/03)			
City & State			Cit	City & State				4. FEI Number Applii 23-7158812 Not A					
Zip		Country	try Zip Country					5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name	and Address of Current	Registere	d Agent		7. Name and Address of New Registered Agent							
						Name							
KUCHIESKI, JOSEPH A 1116 LAKE TERRACE 212					Street Address (P.O. Box Number is Not Acceptable)								
BOYNTON BEACH, FL 33426						City					Zip Cod		
						,				Fi	L	•	
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													
Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Due by May 1, 2005 Trust Fund Contribution. Added to Fees							2 3 N	lake che	ck payable t artment of S				
10.		OFFICERS AND DIF	RECTORS		11.			ADDITIONS/CHAN	IGES TO OFFICE	RS AND D	DIRECTORS IN	J 10	
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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.

SIGNATUJE AND TYPED OR PRINTED MAKE OF SKINING OFFICER OR DIRECTOR

2/23/05

ate Daytime Phone #