

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712273

**Entity Name:** LEISURE LAKES HOME OWNERS CIVIC ASSOCIATION, INC.

**FILED**  
**Mar 12, 2020**  
**Secretary of State**  
**7206347069CC**

**Current Principal Place of Business:**

10 CLUB HOUSE RD.  
LAKE PLACID, FL 33852

**Current Mailing Address:**

P.O. BOX 3273  
LAKE PLACID, FL 33862 US

**FEI Number: 59-2878143**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SCHNIERS, ROBERTA J  
3008 BROOKLANDS AVE  
LAKE PLACID, FL 33852 US

*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: ROBERTA J SCHNIERS**

**03/12/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SORENSON, MIKE  
Address 3012 BEECH STREET  
City-State-Zip: LAKE PLACID FL 33852

Title V  
Name MILLER, BILL  
Address 3128 TANGLEWYLDE AVE  
City-State-Zip: LAKE PLACID FL 33852

Title T  
Name SCHNIERS, ROBERTA J  
Address 3008 BROOKLANDS AVE  
City-State-Zip: LAKE PLACID FL 33852

Title S  
Name LEE, MARSHA  
Address 3001 JACARANDA AVE  
City-State-Zip: LAKE PLACID FL 33852

Title D  
Name SCHULTZ, DUANE  
Address 1152 SYCAMORE STREET  
City-State-Zip: LAKE PLACID FL 33852

Title D  
Name REANEY, NANCY  
Address 3008 ASH STREET  
City-State-Zip: LAKE PLACID FL 33852

Title DIRECTOR  
Name SCHNIERS, DANIEL  
Address 3008 BROOKLANDS AVE  
City-State-Zip: LAKE PLACID FL 33852

Title DIRECTOR  
Name REANEY, DICK  
Address 3008 ASH AVE  
City-State-Zip: LAKE PLACID FL 33852

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*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: ROBERTA SCHNIERS**

**TREASURER**

**03/12/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name KING, GINNY  
Address 3005 BEECH ST  
City-State-Zip: LAKE PLACID FL 33852

Title DIRECTOR  
Name MILLER, PEGGY  
Address 3128 TANGLEWYLDE AVE  
City-State-Zip: LAKE PLACID FL 33852

Title DIRECTOR  
Name SORENSON, KATHY  
Address 3012 BEECH ST  
City-State-Zip: LAKE PLACID FL 33852