#### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 712863** 

Entity Name: LEISUREVILLE COMMUNITY ASSOCIATION, INC.

FILED
Mar 20, 2014
Secretary of State
CC2502865058

# **Current Principal Place of Business:**

2921 W. GOLF BLVD.

POMPANO BEACH, FL 33064

## **Current Mailing Address:**

2921 W. GOLF BLVD.

POMPANO BEACH, FL 33064

FEI Number: 59-1269487 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

TRIPP SCOTT, P.A. 110 SE 6TH STREET 15TH FLOOR

FORT LAUDERDALE, FL 33301 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title D Title VP

Name HEUSER, JAMES Name JOY, FREDERICK Address 2431 N CYPRESS ROAD Address 2981 NW 1 AVE

City-State-Zip: POMPANO BEACH FL 33064 City-State-Zip: POMPANO BCH FL 33064

Title TD Title SD

NameCARTANZA, ALICENameTREUTHARDT, JO ANNAddress2910 NW 2 AVEAddress241 NW 24TH COURT

City-State-Zip: POMPANO BEACH FL 33064 City-State-Zip: POMPANO BEACH FL 33064

Title PD Title D

Name HOLMES, MICHAEL Name CAHILL, MARGARET

Address 251 S GOLF BLVD #293 Address 371 LEISURE BLVD

City-State-Zip: POMPANO BEACH FL 33064 City-State-Zip: POMPANO BEACH FL 33064

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: MICHAEL HOLMES

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

03/20/2014 Date