

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714546

Entity Name: LEISUREVILLE FAIRWAY THREE ASSOCIATION, INC.**Current Principal Place of Business:**2850 WEST GOLF BLVD.
POMPANO BEACH, FL 33064**Current Mailing Address:**2850 WEST GOLF BLVD.
POMPANO BEACH, FL 33064**FEI Number:** 59-1966166**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	TD
Name	BRAGG, PEGGY
Address	2800 W. GOLF BLVD. #124
City-State-Zip:	POMPANO BEACH FL 33064

Title	SECRETARY
Name	CHIASSON, DOROTHEE
Address	2800 W GOLF BLVD
City-State-Zip:	POMPANO BEACH FL 33064

Title	TREASURER
Name	LERULLO, JOE
Address	2800 WEST GOLF BLVD 117
City-State-Zip:	POMPANO BEACH FL 33064

Title	DIRECTOR
Name	CUSTEAU, GULLES
Address	2800 WEST GOLF BLVD 221
City-State-Zip:	POMPANO BEACH FL 33064

Title	VP
Name	PILON, STELLA
Address	2800 W GOLF BLVD #228
City-State-Zip:	POMPANO BEACH FL 33064

Title	DIRECTOR
Name	CUSTEAU, GILLES
Address	2800 W GOLF BLVD # 221
City-State-Zip:	POMPANO BEACH FL 33064

Title	DIRECTOR
Name	LALLIER, MARIO
Address	2800 WEST GOLF BLVD 130
City-State-Zip:	POMPANO BEACH FL 33063

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: PEGGY BRAGG**PRESIDENT****02/24/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date