

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714546

**FILED**  
**Feb 26, 2015**  
**Secretary of State**  
**CC7807295448**

**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 DANEAU, GASTON  
Address 2800 W. GOLF BLVD. #119  
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 PRESIDENT  
Name BRAGG, PEGGY  
Address 2800 W GOLF BLVD, #125  
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 DIRECTOR  
Name VALLEE, HEATHER  
Address 2800 W GOLF BLVD  
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: PEGGY BRAGG**

**PRESIDENT**

**02/26/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date