

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714871

Entity Name: LEISUREVILLE FAIRWAY FOUR ASSOCIATION, INC.**Current Principal Place of Business:**2750 WEST GOLF BLVD.
POMPANO BEACH, FL 33064**Current Mailing Address:**2750 WEST GOLF BLVD.
POMPANO BEACH, FL 33064**FEI Number:** 59-1968211**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	TREASURER/VICE PRESIDENT
Name	SPINO, BILL
Address	2750 W GOLF BLVD, #137
City-State-Zip:	POMPANO BEACH FL 33064

Title	SECRETARY
Name	SEE, MILLIE
Address	2750 W GOLF BLVD #141
City-State-Zip:	POMPANO BEACH FL 33064

Title	PRESIDENT
Name	THAMEL , PETER
Address	2750 W GOLF BLVD 138
City-State-Zip:	POMPANO BEACH FL 30064

Title	DIRECTOR
Name	DILORETO , RAY
Address	2750 W GOLF BLVD 139
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: BILL SPINO

VICE PRESIDENT

03/08/2016

Electronic Signature of Signing Officer/Director Detail_____
Date