## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 714871** 

Entity Name: LEISUREVILLE FAIRWAY FOUR ASSOCIATION, INC.

**FILED** Mar 03, 2023 **Secretary of State** 1242400112CC

## **Current Principal Place of Business:**

2750 WEST GOLF BLVD. POMPANO BEACH, FL 33064

## **Current Mailing Address:**

2750 WEST GOLF BLVD.

**UNIT 235** 

POMPANO BEACH, FL 33064 US

FEI Number: 59-1968211 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

VALANCY & REED, P.A. 310 SE 13TH STREET

FORT LAUDERDALE, FL 33316 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: STEVEN VALANCE P.A 03/03/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **SECRETARY** Title **PRESIDENT** 

Name BARDHI, KEN Name CARO, ASTRID

Address 2750 W GOLF BLVD Address 2750 WEST GOLF BLVD 235

**UNIT 238** 

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

Title **TREASURER** Title VΡ

SEGNINI. ATILIO Name Name HILL. DIANE

Address 2750 WEST GOLF BLVD Address 2750 W GOLF BLVD

**UNIT 237** 134

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

Title DIRECTOR

Name SUAREZ, PEDRO

Address 2750 W GOLF BLVD

#234

POMPANO BEACH FL 33064 City-State-Zip:

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.

03/03/2023 SIGNATURE: ASTRID CARO **PRESIDENT**