

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715008

Entity Name: LEISUREVILLE FAIRWAY NINE ASSOCIATION, INC.**Current Principal Place of Business:**251 SOUTH GOLF BLVD.
POMPANO BEACH, FL 33064**Current Mailing Address:**251 SOUTH GOLF BLVD.
POMPANO BEACH, FL 33064**FEI Number:** 59-1967057**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCOTT, TRIPP P.A.
110 SE 6TH STREET
15TH FLOOR
FT. 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 | PRESIDENT |
| Name | RALSTON, JAMES |
| Address | 251 S GOLF BLVD #293 293 |
| City-State-Zip: | POMPANO BCH FL |

| | |
|-----------------|-------------------------|
| Title | TREASURER |
| Name | MCCLOSKEY, JUDY |
| Address | 251 S GOLF BLVD. 288 |
| City-State-Zip: | POMPANO BCH FL |

| | |
|-----------------|----------------------------|
| Title | DIRECTOR |
| Name | HOLMES, MIKE |
| Address | 251 SOUTH GOLF BLVD 186 |
| City-State-Zip: | POMPANO BEACH FL 33064 |

| | |
|-----------------|-----------------------|
| Title | VD |
| Name | PERRON, LEO |
| Address | 251 S GOLF BLVD # 291 |
| City-State-Zip: | POMPANO BEACH FL |

| | |
|-----------------|------------------------|
| Title | SECRETARY |
| Name | COLE, BETH |
| Address | 251 S GOLF BLVD 283 |
| City-State-Zip: | POMPANO BEACH FL 33064 |

| | |
|-----------------|----------------------------|
| Title | DIRECTOR |
| Name | HALL , ROBERT |
| Address | 251 SOUTH GOLF BLVD 186 |
| 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: JAMES RALSTON

PRESIDENT

02/24/2017

Electronic Signature of Signing Officer/Director Detail

Date