

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

DOCUMENT# 715009

**FILED**  
**Mar 03, 2015**  
**Secretary of State**  
**CC4708402378**

**Entity Name:** LEISUREVILLE FAIRWAY EIGHT ASSOCIATION, INC.

**Current Principal Place of Business:**

301 SOUTH GOLF BLVD  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

301 SOUTH GOLF BLVD  
POMPANO BEACH, FL 33064

**FEI Number:** 59-1966537

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SCOTT, TRIPP S  
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 VD  
Name KULUNAS, VICTOR  
Address 301 S GOLF BLVD #271  
City-State-Zip: POMPANO BEACH FL 33064

Title TREASURER  
Name GEAR, MARYLYN  
Address 301 SOUTH GOLF BLVD #279  
City-State-Zip: POMPANO BEACH FL 33064

Title PRESIDENT  
Name STERN, DEBBIE  
Address 301 S GOLF BLVD  
171  
City-State-Zip: POMPANO BEACH FL 33064

Title DIRECTOR  
Name ANNATONE, EMIL  
Address 301 S GOLF BLVD  
278  
City-State-Zip: POMPANO BEACH FL 33064

Title ASST. TREASURER  
Name HUTCHINGS, SANDY  
Address 301 S GOLF BLVD  
182  
City-State-Zip: POMPANO BEACH FL 33064

Title SECRETARY  
Name FORLATA, CAROLYN  
Address 301 S GOLF  
277  
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:** DEBBIE STERN

**PRESIDENT**

**03/03/2015**

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

\_\_\_\_\_  
Date