I hereby certify that the information indicated on this report or supplemental report is true a oath; that I am an officer or director of the corporation or the receiver or trustee empowere above, or on an attachment with all other like empowered.		
SIGNATURE: JOAN SCHMIDT	PD	04/02/2014

SIGNATURE: JOAN SCHMIDT

Electronic Signature of Registered Agent

SIGNATURE:

Officer/Director Detail :					
Title	PRESIDENT	Title	VD		
Name	SCHMIDT, JOAN	Name	KULUNAS, VICTOR		
Address	301 SOUTH GOLF BLVD #274	Address	301 S GOLF BLVD #271		
City-State-Zip:	POMPANO BEACH FL 33064	City-State-Zip:	POMPANO BEACH FL 33064		
Title	STD				
Name	GEAR, MARYLYN				
Address	301 SOUTH GOLF BLVD #279				
City-State-Zip:	POMPANO BEACH FL 33064				

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.

Current Principal Place of Business:

FEI Number: 59-1966537

Name and Address of Current Registered Agent:

SCOTT, TRIPP S 110 SE 6TH STREET 15TH FLOOR

FT. LAUDERDALE, FL 33301 US

Current Mailing Address:

DOCUMENT# 715009

301 SOUTH GOLF BLVD

301 SOUTH GOLF BLVD

POMPANO BEACH. FL 33064

FILED Apr 02, 2014 Secretary of State CC1817626136

Date

Date

Electronic Signature of Signing Officer/Director Detail

PD

POMPANO BEACH. FL 33064

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: LEISUREVILLE FAIRWAY EIGHT ASSOCIATION, INC.

Certificate of Status Desired: No