

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715161

Entity Name: LEISURE TOWERS ASSOCIATION, INC.**Current Principal Place of Business:**1500 S. OCEAN BLVD.
POMPANO BEACH, FL 33062**Current Mailing Address:**215 CELEBRATION PLACE
SUITE 115
CELEBRATION, FL 34747 US**FEI Number:** 59-1298030**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ACCESS MANAGEMENT
215 CELEBRATION PLACE
SUITE 115
CELEBRATION, FL 34747 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:** CATHY BRAND

02/04/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name TARLOW, DAVID
Address 215 CELEBRATION PLACE
 SUITE 115
City-State-Zip: CELEBRATION FL 34747

Title VP
Name YAKOUB, MITRA
Address 215 CELEBRATION PLACE
 SUITE 115
City-State-Zip: CELEBRATION FL 34747

Title TREASURER
Name TAYLOR, JUNE
Address 215 CELEBRATION PLACE
 SUITE 115
City-State-Zip: CELEBRATION FL 34747

Title SECRETARY
Name BUTLER, JOSEPH
Address 215 CELEBRATION PLACE
 SUITE 115
City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR
Name SMITH, ALLEN
Address 215 CELEBRATION PLACE
 SUITE 115
City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR
Name HERBERT, ROBERT
Address 215 CELEBRATION PLACE
 SUITE 115
City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR
Name RASO, RICHARD
Address 215 CELEBRATION PLACE
 SUITE 115
City-State-Zip: CELEBRATION FL 34747

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: DAVID TARLOW

BOARD PRESIDENT

02/04/2021

Electronic Signature of Signing Officer/Director Detail

Date