

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

DOCUMENT# 715782

**Entity Name:** LEISURE HOUSE ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O LEISURE HOUSE ASSOCIATION, INC  
3000 RIOMAR ST  
FT. LAUDERDALE, FL 33304

**Current Mailing Address:**

C/O LEISURE HOUSE ASSOCIATION, INC  
3000 RIOMAR ST  
FT. LAUDERDALE, FL 33304 US

**FEI Number: 59-1356509**

**Certificate of Status Desired: No**

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

MOODY ACCOUNTING INC  
140 S. UNIVERSITY DR. SUITE B  
PLANTATION, FL 33324 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            PINO, JOHN J  
Address        C/O LEISURE HOUSE ASSOCIATION,  
                  INC  
                  3000 RIOMAR ST UNIT 503  
City-State-Zip: FT. LAUDERDALE FL 33304

Title            VP  
Name            DELUCA, FRANK  
Address        C/O LEISURE HOUSE ASSOCIATION,  
                  INC  
                  3000 RIOMAR STREET UNIT 409  
City-State-Zip: FT. LAUDERDALE FL 33304

Title            SECRETARY  
Name            STALKER, MURIEL  
Address        C/O LEISURE HOUSE ASSOCIATION,  
                  INC  
                  3000 RIOMAR STREET UNIT 209  
City-State-Zip: FT. LAUDERDALE FL 33304

Title            TREASURER  
Name            ELLIOTT, PATRICE  
Address        C/O LEISURE HOUSE ASSOCIATION,  
                  INC  
                  3000 RIOMAR STREET UNIT 506  
City-State-Zip: FT. LAUDERDALE FL 33304

Title            DIRECTOR  
Name            MELIA, DOMINIC  
Address        C/O LEISURE HOUSE ASSOCIATION,  
                  INC  
                  3000 RIOMAR STREET UNIT 303  
City-State-Zip: FT. LAUDERDALE FL 33304

*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: JOHN J PINO**

**PRESIDENT**

**02/23/2023**

Electronic Signature of Signing Officer/Director Detail

Date