

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719224

FILED
Apr 13, 2016
Secretary of State
CC8990849870**Entity Name:** LEISUREVILLE LAKE UNIT G CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1116 LAKE TERRACE
BOYNTON BEACH, FL 33426**Current Mailing Address:**P.O. BOX 1543
BOYNTON BEACH, FL 33425-1543 US**FEI Number: 23-7158812****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HAMOR, TRUDY
2391 SW 13TH WAY
BOYNTON BEACH, FL 33426 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:** TRUDY HAMOR**04/13/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	MARTIN, ANDY
Address	LEISUREVILLE LAKE UNIT G 1116LAKE TER #113
City-State-Zip:	BOYNTON BEACH FL 33426

Title	TREASURER
Name	BELLOTTO, SAM
Address	LEISUREVILLE LAKE UNIT G 1116LAKE TER #107
City-State-Zip:	BOYNTON BEACH FL 33426

Title	DIRECTOR
Name	COLAMONICO, MARY JO
Address	LEISUREVILLE LAKE UNIT G 1116LAKE TER #114
City-State-Zip:	BOYNTON BEACH FL 33426

Title	PRESIDENT
Name	EGAN, JOE
Address	LEISUREVILLE LAKE UNIT G 1116LAKE TER #206
City-State-Zip:	BOYNTON BEACH FL 33426

Title	SECRETARY
Name	HAMOR, TRUDY
Address	1116 LAKE TERR. #114
City-State-Zip:	BOYNTON BEACH FL 33126

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: TRUDY HAMOR**SECRETARY****04/13/2016**

Electronic Signature of Signing Officer/Director Detail

Date