2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721791

Entity Name: LEUCADENDRA RECREATIONAL & IMPROVEMENT

ASSOCIATION, INC.

Current Principal Place of Business:

199 LEUCADENDRA DRIVE CORAL GABLES, FL 33156

Current Mailing Address:

P.O. BOX 144723

CORAL GABLES, FL 33114 US

FEI Number: 74-3246265 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES REGISTERED AGENTS, INC. 9300 S. DADELAND BLVD, SUITE 600 MIAMI, FL 33156 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: JL HOFMANN 01/24/2022

Electronic Signature of Registered Agent

Officer/Director Detail:

Title SECRETARY Title TREASURER

Name ROSS, AUDREY H Name KELLY, BARBARA

Address 120 LEUCADENDRA DRIVE Address 640 ARVIDA PARKWAY

City-State-Zip: CORAL GABLES FL 33156 City-State-Zip: CORAL GABLES FL 33156

Title DIRECTOR Title VF

Name MEDINA, MANUEL Name BARED, JOSE

Address 555 ARVIDA PARKWAY Address 9025 ARVIDA DRIVE

City-State-Zip: CORAL GABLES FL 33156 City-State-Zip: CORAL GABLES FL 33156

Title PRESIDENT

Name SULLIVAN, JOHN S

Address 160 LEUCADENDRA DRIVE City-State-Zip: CORAL GABLES FL 33156

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: AUDREY H. ROSS

Electronic Signature of Signing Officer/Director Detail

SECRETARY

01/24/2022 Date

FILED Jan 24, 2022

Secretary of State

5900960135CC

Date