

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722155

**Entity Name:** LEISURE BEACH CIVIC ASSOCIATION, INC.**Current Principal Place of Business:**12816 2ND ISLE  
HUDSON, FL 34667**Current Mailing Address:**P O BOX 5366  
HUDSON, FL 34674 US**FEI Number: 23-7433819****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RHODES, ANN GERALDSON  
12816 2ND ISLE  
HUDSON, FL 34667 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:** ANN RHODES

05/04/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CO-PRESIDENT  
Name GEDAN, TERRY  
Address 12825 3RD ISLE  
City-State-Zip: HUDSON FL 34667

Title DIRECTOR  
Name KAISER, TIM  
Address 6615 LEESIDE  
City-State-Zip: HUDSON FL 34667

Title VP  
Name REDIGER, MARK  
Address 2ND ISLE  
City-State-Zip: HUDSON FL 34667

Title TREASURER  
Name RHODES, ANN GERALDSON  
Address 12816 2ND ISLE  
City-State-Zip: HUDSON FL 34667

Title DIRECTOR  
Name GORE, CHARLY  
Address 2ND ISLE  
City-State-Zip: HUDSON FL 34667

Title CO-PRESIDENT  
Name HUMPHRIES, GINNY  
Address 12821 2ND ISLE  
City-State-Zip: HUDSON FL 34667

Title DIRECTOR  
Name RAMOS, DONNA M  
Address 12624 4TH ISLE  
City-State-Zip: HUDSON FL 34667

*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:** ANN G RHODES**TREASURER**

05/04/2020

Electronic Signature of Signing Officer/Director Detail

Date