DOCUMENT# 743691
Entity Name: LEISURE VILLAS EAST PROPERTY OWNERS' ASSOCIATION, INC.
Current Principal Place of Business:

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

8231 RANDWICK CT NORTH PORT, FL 34287

Current Mailing Address:

8231 RANDWICK CT NORTH PORT, FL 34287 US

FEI Number: 59-2104721

Name and Address of Current Registered Agent:

MORRIS, STEPHEN S 8431 BOULTON CT NORTH PORT, FL 34287 US Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Director Detail :				
Title	PD	Title	TD	
Name	FRAME, RALPH	Name	MORRIS, STEPHEN	
Address	8370 PICKWICK RD	Address	8431 BOULTON CT	
City-State-Zip:	NORTH PORT FL 34287	City-State-Zip:	NORTH PORT FL 34287	
Title	DVP	Title	D	
Name	KNAPP, DICK	Name	RICE, ARTHUR	
Address	8271 PICKWICK RD	Address	8451 PICKWICK RD	
City-State-Zip:	NORTH PORT FL 34287	City-State-Zip:	NORTH PORT FL 34287	
Title	SD	Title	D	
Name	CVENGROS, ANGIE	Name	CORNELL, PAUL	
Address	8130 PICKWICK RD	Address	8241 PICKWICK RD	
City-State-Zip:	NORTH PORT FL 34287	City-State-Zip:	NORTH PORT FL 34287	
Title	D			

litle	В	
Name	MARVIN, ROY	
Address	8430 PICKWICK RD	
City-State-Zip:	NORTH PORT FL 34287	

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: STEPHEN S MORRIS

TREASURER

02/13/2014

Electronic Signature of Signing Officer/Director Detail

Date

Date