#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 769417

Entity Name: FRIENDS OF LEU GARDENS, INC.

#### **Current Principal Place of Business:**

C/O ROBERT E. BOWDEN 1920 N. FOREST AVE. ORLANDO, FL 32803-1537

# **Current Mailing Address:**

C/O ROBERT E. BOWDEN 1920 N. FOREST AVE. ORLANDO, FL 32803-1537 US

# FEI Number: 59-2319239

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

BOWDEN, ROBERT E. 1920 NORTH FOREST AVENUE ORLANDO, FL 32803 US

Certificate of Status Desired: Yes

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:

Address

City-State-Zip:

Electronic Signature of Registered Agent

# **Officer/Director Detail :**

Title	VC	Title	CHAIR
Name	ANDERSON-FRANCIS, LORELEI	Name	FRANCOS, MICHELLE
Address	809 PINE MEADOWS ROAD	Address	474 BONIFAY AVENUE
City-State-Zip:	ORLANDO FL 32825	City-State-Zip:	ORLANDO FL 32825
Title	DL	Title	DL
Name	LOMBARDO, JENNIFER	Name	PROVENZALE, MICHAEL
Address	1416 NEBRASKA ST.	Address	1511 IOWA PLACE
City-State-Zip:	ORLANDO FL 32803	City-State-Zip:	ORLANDO FL 32803
Title	DL	Title	DL
Name	WILLIAMS, CAMARA	Name	COTTLE, ISAIAH
Address	13438 BONICA WAY	Address	2005 E. WASHINGTON ST.
City-State-Zip:	WINDERMERE FL 34786	City-State-Zip:	ORLANDO FL 32803
Title	DL		
Name	O'CONNOR, BRENDA		

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: MICHELLE FRANCOS

1101 MONTANA ST

ORLANDO FL 32803

CHAIR

01/13/2017

Electronic Signature of Signing Officer/Director Detail

Date

Date