

2013 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**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BOWDEN, ROBERT E.
1920 NORTH FOREST AVENUE
ORLANDO, FL 32803 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:** _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title DL
Name FOSTER, BRIAN
Address 482 SOUTH KELLER ROAD
City-State-Zip: ORLANDO FL 32810Title DL
Name HOOD, JAY
Address 120 NORTH ORANGE AVE.
City-State-Zip: ORLANDO FL 32801Title DL
Name SANCHEZ DE FUENTES, ALBERTO
Address 420 SOUTH ORANGE AVE. SUITE 190
City-State-Zip: ORLANDO FL 32801Title DL
Name ROSE-NANCY, JOSEPH
Address 504 WATER WAY COURT
City-State-Zip: OCOEE FL 34761Title C
Name FARRIS, PHILIP
Address 2012 VIRGINIA DR
City-State-Zip: ORLANDO FL 32803Title VC
Name FINNEGAN, TROY
Address 390 N. ORANGE AVE., SUITE 1400
City-State-Zip: ORLANDO FL 32801Title DL
Name DALTON, FRANCES T
Address 1127 OVERLOOK DRIVE
City-State-Zip: ORLANDO FL 32804

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: FARRIS, PHILIP

C

02/01/2013

Electronic Signature of Signing Officer/Director Detail

Date