# DOCUMENT# 769417

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

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 :**

	Title	CHAIRMAN	Title	VC
	Name	WEST, ANNE	Name	YOUNG, ANDRE
	Address	458 N. SUNDANCE DRIVE	Address	1312 E. ROBINSON STREET
	City-State-Zip:	LAKE MARY FL 32746	City-State-Zip:	ORLANDO FL 32801
	Title	DL	Title	DL
	Name	HARKINS, DONALD III	Name	JONES, AUDREY
	Address	1102 ELMWOOD STREET	Address	6512 GARDEN SPRING CT.
	City-State-Zip:	APT. E ORLANDO FL 32801	City-State-Zip:	ORLANDO FL 32818
	Title Name Address City-State-Zip:	DL RICHEMOND, ADILIA 2916 HELEN AVENUE ORLANDO FL 32804	Title Name Address City-State-Zip:	DL TERRITO, ANGELA 653 EAST MARKS STREET ORLANDO FL 32803
	Title Name Address	DL WHITED, JAMES 613 E. PINE STREET		

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.

CHAIR

#### SIGNATURE: ANNE WEST

City-State-Zip: ORLANDO FL 32801

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

Date