

2016 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 VC
Name HOOD, JAY
Address 11114 CRESCENT BAY BLVD.
City-State-Zip: CLERMONT FL 34711Title DL
Name FRANCOS, MICHELLE
Address 400 E. COLONIAL DR. # 910
City-State-Zip: ORLANDO FL 32803Title DL
Name ANDERSON-FRANCIS, LORELEI
Address 809 PINE MEADOWS ROAD
City-State-Zip: ORLANDO FL 32825Title DL
Name WILLIAMS, CAMARA
Address 764 SHERWOOD TERRACE
City-State-Zip: ORLANDO FL 32818Title CHAIR
Name SANCHEZ DE FUENTES, ALBERTO
Address 3714 WYLDEWOODE LANE
City-State-Zip: ORLANDO FL 32806Title DL
Name LOMBARDO, JENNIFER
Address 1416 NEBRASKA ST.
City-State-Zip: ORLANDO FL 32803Title DL
Name PROVENZALE, MICHAEL
Address 1511 IOWA PLACE
City-State-Zip: ORLANDO FL 32803

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: SANCHEZ DE FUENTES, ALBERTO**CHAIR****01/22/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date