

2019 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 PROVENZALE, MICHAEL
Address 1511 IOWA PLACE
City-State-Zip: ORLANDO FL 32803Title CHAIRMAN
Name WILLIAMS, CAMARA
Address 13438 BONICA WAY
City-State-Zip: WINDERMERE FL 34786Title DL
Name COTTLE, ISAIAH
Address 2005 E. WASHINGTON ST.
City-State-Zip: ORLANDO FL 32803Title DL
Name KELLY, JASON
Address 8238 WOODSWORTH DRIVE
City-State-Zip: ORLANDO FL 32804Title DL
Name MONTOYA, DANIELLE
Address 27 EAST VANDERBILT STREET
City-State-Zip: ORLANDO FL 32804Title DL
Name MORSBERGER, MICHAEL
Address 805 EUCID AVENUE
City-State-Zip: ORLANDO FL 32801Title DL
Name PIKE, STEPHANIE
Address 2420 JAMIE CIRCLE
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: CAMARA WILLIAMS**CHAIR****02/13/2019**

Electronic Signature of Signing Officer/Director Detail

Date