

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13866

**Entity Name:** LEISURE LAKE CO-OP, INC.

**Current Principal Place of Business:**

2900 8TH. AVE. WEST  
PALMETTO, FL 34221

**Current Mailing Address:**

2900 8TH. AVE. WEST  
PALMETTO, FL 34221

**FEI Number:** 59-2766457

**Certificate of Status Desired:** No

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

CARTER, JOHN MANAGER  
2900 8TH. AVE. WEST  
PALMETTO, FL 34221 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 PD  
Name SAGER, ROBERT  
Address 112 LAKEVIEW DR.  
City-State-Zip: PALMETTO FL 34221

Title VD  
Name MCCORMACK, JEAN ANN  
Address 62 LEISURE WAY  
City-State-Zip: PALMETTO FL 34221

Title TD  
Name PIETERS, LINDA  
Address 469 KAISER DR.  
City-State-Zip: PALMETTO FL 34221

Title SD  
Name PFISTER, BONNIE  
Address 321 PEACE MANOR  
City-State-Zip: PALMETTO FL 34221

*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:** BONNIE PFISTER

**SECRETARY**

**01/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date