

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000080810

**Entity Name:** THE LEISURE DAYS, LLC

**Current Principal Place of Business:**

9526 VERCELLI STREET  
LAKE WORTH, FL 33467

**Current Mailing Address:**

19002 LOS ALIMOS STREET  
NORTHRIDGE, CA 91326

**FEI Number: 55-0904145**

**Certificate of Status Desired:** No

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

VINCENT, ARTHUR ESQ.  
800 EAST BROWARD BLVD.  
607  
FORT LAUDERDALE, FL 33301 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

**Authorized Person(s) Detail :**

Title MGRM  
Name SAMOSS, LARRY C  
Address 9526 VERCELLI STREET  
City-State-Zip: LAKEWORTH FL 33467

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE: LARRY SAMOSS**

**MGRM**

**02/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date