


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2007 8:00 am**  
**Secretary of State**

05-03-2007 90051 019 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                            |                                                                                     |                                                                                       |                                                                                                                                                                                                                                       |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # 711851</b><br>1. Entity Name<br><b>LEISURE GARDENS ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                            |                                                                                     |                                                                                       |                                                                                                                                                      |  |
| Principal Place of Business<br><b>1481 SOUTH OCEAN BLVD.<br/>LAUDERDALE BY THE SEA, FL 33062</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                            |                                                                                     | Mailing Address<br><b>2626 E. COMMERCIAL BLVD<br/>4<br/>FORT LAUDERDALE, FL 33308</b> |                                                                                                                                                                                                                                       |  |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                            | 3. Mailing Address                                                                  |                                                                                       |                                                                                                                                                                                                                                       |  |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                            | Suite, Apt. #, etc.                                                                 |                                                                                       |                                                                                                                                                                                                                                       |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                            | City & State                                                                        |                                                                                       |                                                                                                                                                                                                                                       |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country                                                                                                                                                    | Zip                                                                                 | Country                                                                               | 4. FEI Number<br><b>59-1204946</b>                                                                                                                                                                                                    |  |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                            |                                                                                     |                                                                                       | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                                                |  |
| 6. Name and Address of Current Registered Agent<br><br><b>MANAGEMENT ASSISTANT, INC<br/>2626 E COMMERCIAL BLVD<br/>APT #4<br/>FORT LAUDERDALE, FL 33308</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                            |                                                                                     |                                                                                       | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |  |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                            |                                                                                     |                                                                                       |                                                                                                                                                                                                                                       |  |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                            |                                                                                     |                                                                                       |                                                                                                                                                                                                                                       |  |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2007</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                            | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                                       | <b>\$5.00 May Be<br/>Added to Fees</b>                                                                                                                                                                                                |  |
| <b>Make check payable to<br/>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                            |                                                                                     |                                                                                       |                                                                                                                                                                                                                                       |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                            |                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                          |                                                                                                                                                                                                                                       |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>BOCCHETTA, ROBERT<br>1481 S OCEAN BLVD 138<br>LAUDERDALE BY THE SEA, FL 33062 <div style="text-align: right;"><input type="checkbox"/> Delete</div>   |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                        | D<br>JOHN LEZAK<br>1481 S OCEAN BLVD #314 FL.<br>LAUDERDALE BY THE SEA 33062 <div style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</div>                                       |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>WEST, VICTOR<br>1481 S OCEAN BLVD<br>LAUDERDALE BY THE SEA, FL 33062 <div style="text-align: right;"><input checked="" type="checkbox"/> Delete</div> |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                        | P.<br>PRESIDENT<br>DAWN ROGERS<br>1481 S OCEAN BLVD #220 FL.<br>LAUDERDALE BY THE SEA 33062 <div style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</div>                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DS<br>HOERNING, ROBERT<br>1481 S OCEAN BLVD 306<br>POMPANO BEACH, FL 33062 <div style="text-align: right;"><input type="checkbox"/> Delete</div>           |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                        | DTS<br><div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>HAYES, THOMAS<br>1481 S OCEAN BLVD 238<br>POMPANO BEACH, FL 33062 <div style="text-align: right;"><input checked="" type="checkbox"/> Delete</div>    |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                        | V/T<br>MARIE FRESSILLI<br>1481 SOUTH OCEAN BLVD #132<br>LAUDERDALE BY THE SEA FL 33062 <div style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</div>                             |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>DUNN, KEN<br>1481 S OCEAN BLVD 420<br>LAUDERDALE BY THE SEA, FL 33062 <div style="text-align: right;"><input type="checkbox"/> Delete</div>           |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                        | D<br>DENNIS TURNER<br>1481 SOUTH OCEAN BLVD<br>#228 FL.<br>LAUDERDALE BY THE SEA 33062 <div style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</div>                             |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | T/D<br>NIEMI, JAMES<br>1481 S OCEAN BLVD APT #516<br>LAUDERDALE BY THE SEA, FL 33062 <div style="text-align: right;"><input type="checkbox"/> Delete</div> |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                        | D<br>DAVID ROWE<br>1481 SOUTH OCEAN BLVD<br>#325 FL.<br>LAUDERDALE BY THE SEA 33062 <div style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</div>                                |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                                                                                                            |                                                                                     |                                                                                       |                                                                                                                                                                                                                                       |  |
| <b>SIGNATURE:</b> <u>Marie Fressilli</u> <b>MARIE FRESSILLI</b> <span style="float: right;">5/1/07 954-881-2710</span><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                            |                                                                                     |                                                                                       |                                                                                                                                                                                                                                       |  |