## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#714507** 

FILED Apr 21, 2009 Secretary of State

Entity Name: LEISUREVILLE FAIRWAY TWO ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2850 WEST GOLF BLVD. POMPANO BEACH, FL 33064

Current Mailing Address: New Mailing Address:

2850 WEST GOLF BLVD. POMPANO BEACH, FL 33064

FEI Number: 59-1971860 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SCHNER, LARRY E LAW OFFICES OF LARRY E. SCHNER, PA 750 SOUTH DIXIE HIGHWAY BOCA RATON, FL 33432 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:

Clarksonia Ciamakura of Daniakura d Annut

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition Name: DREWATT, THOMAS Name: DREWETT, THOMAS

Address: 2850 WEST GOLF BLVD. #115 Address: 2850 WEST GOLF BLVD. #115
City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: POMPANO BEACH, FL 33064

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 RAFERTY, MARION
 Name:

 Address:
 2850 WEST GOLF BLVD. #211
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33064
 City-St-Zip:

Title: PTD ( ) Delete Title: PTD (X) Change ( ) Addition

Name: DITORE, RUTH M. Name: DITORE, RUTH

 Address:
 2850 W. GOLF BLVD
 Address:
 2850 W. GOLF BLVD #218

 City-St-Zip:
 POMPANO BEACH, FL
 City-St-Zip:
 POMPANO BEACH, FL

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RUTH DITORE PTD 04/21/2009