

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714871

FILED
Apr 03, 2012
Secretary of State

Entity Name: LEISUREVILLE FAIRWAY FOUR ASSOCIATION, INC.

Current Principal Place of Business:

2750 WEST GOLF BLVD.
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

2750 WEST GOLF BLVD.
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 59-1968211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIPP SCOTT, P.A.
625 N. FLAGLER DR, 7TH FLOOR
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: JOHNS, JUDY
Address: 2750 W GOLF BLVD, #140
City-St-Zip: POMPANO BEACH, FL 33064

Title: VD
Name: SPINO, BILL
Address: 2750 W GOLF BLVD, #137
City-St-Zip: POMPANO BEACH, FL 33064

Title: VD
Name: WATERS, ROGER
Address: 2750 W GOLF BLVD #237
City-St-Zip: POMPANO BEACH, FL 33064

Title: SD
Name: SEE, MILLIE
Address: 2750 W GOLF BLVD #141
City-St-Zip: POMPANO BEACH, FL 33064

Title: TD
Name: JOHNSON, JOANNE
Address: 2750 W GOLF BLVD #231
City-St-Zip: POMPANO BEACH, FL 33064

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: JUDY JOHNS

PD

04/03/2012

Electronic Signature of Signing Officer or Director

Date