

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714872

FILED
Apr 21, 2009
Secretary of State

Entity Name: LEISUREVILLE FAIRWAY FIVE ASSOCIATION, INC.

Current Principal Place of Business:

2700 WEST GOLF BLVD.
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

2700 WEST GOLF BLVD.
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 59-1967999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNER, LARRY E
LAW OFFICES OF LARRY E. SCHNER, PA
750 SOUTH DIXIE HIGHWAY
BOCA RATON, FL 33432 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: SD () Delete
Name: FREY, JUDITH
Address: 2700 WEST GOLF BLVD, #249
City-St-Zip: POMPAÑO BEACH, FL

Title: VD () Delete
Name: LEGERE, RONALD
Address: 2700 W GOLF BLVD #242
City-St-Zip: POMPAÑO BEACH, FL 33064

Title: PTD () Delete
Name: WOOD, JOAN
Address: 2700 W GOLF BLVD #248
City-St-Zip: POMPAÑO BEACH, FL 33064

Title: D () Delete
Name: DEVLIN, MARY
Address: 2700 WEST GOLF BLVD, #147
City-St-Zip: POMPAÑO BEACH, FL

Title: D () Delete
Name: RANSDELL, ETHEL
Address: 2700 W GOLF BLVD #250
City-St-Zip: POMPAÑO BEACH, FL 33064

Title: D () Delete
Name: PREKUP, SUNNI
Address: 2700 WEST GOLF BLVD. #246
City-St-Zip: POMPAÑO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RANSDELL, ETHEL
Address: 2700 W GOLF BLVD #250
City-St-Zip: POMPAÑO BEACH, FL 33064

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOAN WOOD

PTD

04/21/2009

Electronic Signature of Signing Officer or Director

Date