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May 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 715010 (5)

1. Corporation Name
LEISUREVILLE FAIRWAY SEVEN ASSOCIATION, INC.



Principal Place of Business: 401 SOUTH GOLF BLVD. POMPANO BEACH FL 33064
Mailing Address: 401 SOUTH GOLF BLVD. POMPANO BEACH FL 33064-3278

3. Date Incorporated or Qualified: 07/25/1968
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 2b. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. 25. 29. 30.

4. FEI Number: 59-1968428
Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUBERT, JOSEPH A.
2400 E COMMERCIAL BLVD.
FT LAUDERDALE FL 33308

81 Name: S. HOWARD ORNER, P.A.
82 Street Address (P.O. Box): 2855 UNIVERSITY DR., STE. 110
83: CORAL SPRINGS, FL 33005
84 City: CORAL SPRINGS
85 Zip Code: FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: S. Howard Orner 4/22/97
Signature typed or printed name of registered agent and fee, if applicable. (NOTE: Registered Agent signature required when reinstating)

Table with 5 rows and 2 columns: OFFICERS AND DIRECTORS. Columns include Title, Name, Street Address, City-ST-ZIP, and a DELETED checkbox.

Table with 5 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns include Title, Name, Street Address, City-ST-ZIP, and Change/Addition checkboxes.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: Gloria A. Quinn
Date: 4/24/97
Daytime Phone #: 954-942-9707

CR2E037 (9/96)