

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715010

FILED
Apr 21, 2009
Secretary of State

Entity Name: LEISUREVILLE FAIRWAY SEVEN ASSOCIATION, INC.

Current Principal Place of Business:

401 SOUTH GOLF BLVD.
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

401 SOUTH GOLF BLVD.
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 59-1968428

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
250 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: PD () Delete
Name: BRADBURY, IRENE
Address: 401 S GOLF BLVD, #170
City-St-Zip: POMPANO BEACH, FL 33064

Title: SD () Delete
Name: MARSHALL, SALLY M
Address: 401 S GOLF BLVD, #270
City-St-Zip: POMPANO BEACH, FL

Title: TD () Delete
Name: DRISCOLL, B. DORIS
Address: 401 S GOLF BLVD, #269
City-St-Zip: POMPANO BEACH, FL

Title: VD () Delete
Name: ZAYDEL, ANDY
Address: 401 S GOLF BLVD #267
City-St-Zip: POMPANO BEACH, FL

Title: D (X) Delete
Name: SEE, FREDERICK
Address: 401 S GOLF BLVD #266
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: MARSHALL, SALLY M
Address: 401 S GOLF BLVD, #270
City-St-Zip: POMPANO BEACH, FL

Title: D (X) Change () Addition
Name: DRISCOLL, B. DORIS
Address: 401 S GOLF BLVD, #269
City-St-Zip: POMPANO BEACH, FL

Title: VD (X) Change () Addition
Name: SEE, FREDERICK
Address: 401 S GOLF BLVD #266
City-St-Zip: POMPANO BEACH, FL

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: IRENE BRADBURY

PD

04/21/2009

Electronic Signature of Signing Officer or Director

Date