

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715011

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** LEISUREVILLE FAIRWAY SIX ASSOCIATION, INC.

**Current Principal Place of Business:**

2650 WEST GOLF BLVD.  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

2650 WEST GOLF BLVD.  
POMPANO BEACH, FL 33064

**New Mailing Address:**

**FEI Number:** 59-1144011

**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: GENTILE, FRANK  
Address: 2650 WEST GOLF BLVD.  
City-St-Zip: POMPANO BEACH, FL 33064

Title: DV ( ) Delete  
Name: ROSSI, PHILIP  
Address: 2650 WEST GOLF BLVD. #254  
City-St-Zip: POMPANO BEACH, FL 33064

Title: SD ( ) Delete  
Name: CASHIN, GLADYS M  
Address: 2650 W GOLF BLVD, #158  
City-St-Zip: POMPANO BEACH, FL 33064

Title: TD ( ) Delete  
Name: BLANCO, AUTURO  
Address: 2650 W GOLF BLVD #265  
City-St-Zip: POMPANO BEACH, FL 33064

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: TD (X) Change ( ) Addition  
Name: BLANCO, ARTURO  
Address: 2650 W GOLF BLVD #265  
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Change (X) Addition  
Name: LAVALLA, GUY  
Address: 2650 W GOLF BLVD #159  
City-St-Zip: POMPANO BEACH, FL 33064

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: FRANK GENTILE

PD

04/21/2009

Electronic Signature of Signing Officer or Director

Date