2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# 715782

Entity Name: LEISURE HOUSE ASSOCIATION, INC.

Current Principal Place of Business:

3000 RIO MAR STREET
OFFICE
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

3000 RIO MAR STREET
OFFICE
FT. LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 59-1356509 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUMIN, EDWARD R.
2870 E. OAKLAND PARK BLVD.
FORT LAUDERDALE, FL 33306 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:	D	( ) Delete
Name:	CLARKE, DAVID	
Address:	3000 RIO MAR ST	
City-St-Zip:	FT LAUDERDALE, FL 33304	
Title:	TD	( ) Delete
Name:	TEIXEIRA, MARY	
Address:	3000 RIO MAR ST.	
City-St-Zip:	FT. LAUDERDALE, FL 33304	
Title:	ST	( ) Delete
Name:	STALKER, MURIEL	
Address:	3000 RIO MAR ST.	
City-St-Zip:	FT. LAUDERDALE, FL 33304	
Title:	D	( ) Delete
Name:	SMITH, MARY ANN	
Address:	3000 RIO MAR ST.	
City-St-Zip:	FT. LAUDERDALE, FL 33304	
Title:	VD	( ) Delete
Name:	DE CASTILLA, JOSE	
Address:	3000 RIO MAR ST.	
City-St-Zip:	FT. LAUDERDALE, FL 33304	
Title:	PD	( ) Delete
Name:	HICKEY, F JOHN	
Address:	3000 RIO MAR ST	
City-St-Zip:	FT LAUDERDALE, FL 33304	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: F. JOHN HICKEY PD 04/06/2009
Electronic Signature of Signing Officer or Director — Date