

719229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

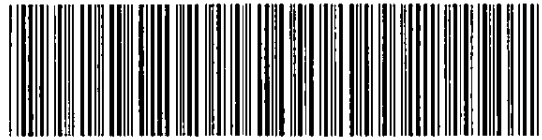
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800433802968

19,229

MEMORANDUM

FILED IN OFFICE OF SECRETARY
OF STATE, STATE OF ILLINOIS
BY J. H. ...

THE AGENT
SECRETARY OF STATE

COLEMAN, LEONARD, MORRISON AND RIDDLE

2810 EAST OAKLAND PARK BOULEVARD

FORT LAUDERDALE, FLORIDA 33005

POST OFFICE BOX 1148

CURTIN R. COLEMAN, II
WILLIAM F. LEONARD
RICHARD W. MORRISON
RICHARD W. RIDDLE

TELEPHONE
682-0871

August 19, 1970

Secretary of State
Capitol Building
Tallahassee, Florida 32304

Attn: Nonprofit Supervisor
Corporations Division

Re: Leisureville Lake Unit F Condominium Association, Inc.
Leisureville Lake Unit G Condominium Association, Inc.
Leisureville Lake Unit H Condominium Association, Inc. *as*
Leisureville Lake Unit J Condominium Association, Inc.

Gentlemen:

Enclosed please find original and two copies of Articles of Incorporation of the above named corporations, all of which are proposed Florida corporations not for profit, together with our check in the amount of \$148.00 to cover the following for each:

Filing Fee	\$ 25.00
2 Certified Copies of Articles of Incorporation	10.00
Resident Agent Certificate	2.00
	<hr/>
	\$ 37.00 X 4 = \$148.00

We would appreciate your returning Resident Agent Certificate form and two certified copies of each of the Articles of Incorporation at your early convenience.

Sincerely,

RICHARD W. MORRISON

RWN:cu
Enclosures

SEP 1 8 52 AM '70
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NPH

19,229

cc send

9-1

aw

Department of State

THE CAPITOL
TALLAHASSEE 32304TOM ADAMS
SECRETARY OF STATE

August 26, 1970

Richard W. Morrison, Esquire
Attorney at Law
2810 East Oakland Park Boulevard
Fort Lauderdale, Florida 33306

Dear Mr. Morrison:

Subject: LEISUREVILLE LAKE UNIT (F,G,H,J) CONDOMINIUM ASSOCIATION, INC.
a Florida corporation not for profit.

Documents returned: X charter; amendment; affidavit;
 resident agent form; corporation report; bylaws not
required to be filed here; \$148 check acknowledged.

Additional information requested:

1. Section 617.013, F.S.: (2) (d)
2. Section 617.015, F.S., amount due:
3. Name is not available.
4. Name is to appear in English only.
5. Notarization incomplete.
6. Condominium. Name shall include the word "condominium" or be followed by the words "a condominium."
7. Condominium association. Name shall include the word "condominium" or be followed by the words "a condominium association."
8. Legal description of the land to be included.
9. Include address in Article I for mailing of annual report form.
10. Certified copy of the original charter and all amendments by the clerk of the circuit court showing original filing date.
11. President's and secretary's signatures. Both signatures to be acknowledged indicating reincorporation was accomplished for the purposes and uses therein stated.
12. Preamble to indicate reincorporation is properly authorized and is a corporate act.
13. Affidavit of consent from the individual named or from the chief executive of the organization named in the charter; This is administrative policy. Kindly include affidavit from:
14. Other: This letter is in regard to all four charters.

Sincerely,

TOM ADAMS
Secretary of State

Roy L. Allen
By:
Roy L. Allen, Chief
Corporations Bureau

REAR:rv

* See 2 Term.

FILED
SEP 1 8 52 AM '70
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION, INC.

The undersigned hereby associate themselves for the purpose of forming a corporation not for profit under Chapter 617, Florida Statutes, and certify as follows:

ARTICLE I

NAME

The name of the corporation shall be LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION, INC. For convenience the corporation shall herein be referred to as the Association.

18500 *****2.00
18500 *****10.00
18500 *****25.00

ARTICLE II

PURPOSE

1. The purpose for which the Association is organized is to provide an entity pursuant to Section 711.12 of the Condominium Act, which is Chapter 711, Florida Statutes, for the operation of LEISUREVILLE LAKE UNIT H, a condominium, located upon the following lands in Palm Beach County, Florida:

Parcel H, Section 4-A of Palm Beach Leisureville, according to the Plat thereof recorded in Plat Book 29, Page 30, public records of Palm Beach County, Florida.

2. The Association shall make no distributions of income to its members, directors or officers.

FILED
SEP 18 8 58 AM '70

ARTICLE III

POWERS

The powers of the Association shall include and be governed by the following provisions:

1. The Association shall have all of the common law and statutory powers of a corporation not for profit which are not in conflict with the terms of these Articles.

2. The Association shall have all of the powers and duties set forth in the Condominium Act except as limited by these Articles and the Declaration of Condominium, and all of the powers and duties reasonably necessary to operate the Condominium as set forth in the Declaration thereof and as it may be amended from time to time, including but not limited to the following:

(a) To make and collect assessments against members to defray the costs, expenses and losses of the condominium.

(b) To use the proceeds of assessments in the exercise of its powers and duties.

(c) The maintenance, repair, replacement and operation of the condominium property.

(d) The purchase of insurance upon the condominium

TAX	
RECORDING	25.00
COPY	10.00
A. FEE	2.00
CH	
CH	
CH	
CH	39.00
CH	
CH	

property and insurance for the protection of the Association and its members.

(e) The reconstruction of improvements after casualty and the further improvement of the property.

(f) To make and amend reasonable regulations respecting the use of the property in the condominium; provided however, that all such regulations and amendments thereto shall be approved by not less than 75% of the votes of the entire membership of the Association before such shall become effective.

(g) To approve or disapprove the transfer, mortgage and ownership of apartments as may be provided by the Declaration of Condominium and the By-Laws.

(h) To enforce by legal means the provisions of the Condominium Act, the Declaration of Condominium, these Articles, the By-Laws of the Association and the regulations for the use of the property in the condominium.

(i) To contract for the management of the condominium and to delegate to such contractor all powers and duties of the Association except such as are specifically required by the Declaration of Condominium to have approval of the Board of Directors or the membership of the Association.

(j) To contract for the management or operation of portions of the common elements susceptible to separate management or operation, and to lease the same.

(k) To employ personnel to perform the services required for proper operation of the condominium.

(l) To enter into, as Lessee, a Ninety-Nine Year Lease to a portion of the land and to make and collect assessments against members to defray the costs of taxes and rental thereunder and the cost of maintenance, repair, replacement and operation of the improvements thereon.

3. All funds and the titles of all properties acquired by the Association and the proceeds thereof shall be held in trust for the members in accordance with the provisions of the Declaration of Condominium, these Articles of Incorporation and the By-Laws.

4. The powers of the Association shall be subject to and shall be exercised in accordance with the provisions of the Declaration of Condominium and the By-Laws.

ARTICLE IV

MEMBERS

1. The members of the Association shall consist of all of the record owners of Apartments.

2. Change of membership in the Association shall be established by the recording in the public records of Palm Beach County, Florida, of a deed or other instrument establishing a record title to an apartment in the condominium and the delivery to the Association of a certified copy of such instrument, the owner designated by such instrument thereby becoming a member of the Association. The membership of the prior owner shall be thereby terminated.

3. The share of a member in the funds and assets of the Association cannot be assigned, hypothecated or transferred in any manner except as an appurtenance to his apartment.

4. The members of the Association shall be entitled to at least one vote for each apartment owned by them. The exact number of votes to be cast by owners of an apartment and the manner of exercising voting rights shall be determined by the By-Laws of the Association.

ARTICLE V

DIRECTORS

1. The affairs of the Association will be managed by a board consisting of the number of directors as shall be determined by the By-Laws, but not less than three directors, and in the absence of such determination shall consist of three directors.

2. Directors of the Association shall be elected at the annual meeting of the members in the manner determined by the By-Laws. Directors may be removed and vacancies on the board of directors shall be filled in the manner provided by the By-Laws.

3. The first election of directors shall not be held until after all of the apartments of the condominium have been sold by the developer, or until after January 1, 1974 or until developer elects to terminate its control of the condominium, whichever shall first occur. The directors herein named shall serve until the first election of directors, and any vacancies in their number occurring before the first election shall be filled by the remaining directors.

4. The names and addresses of the members of the first board of directors who shall hold office until their successors are elected and have qualified, or until removed, are as follows:

FELIX GRANADOS	229 Commercial Boulevard Lauderdale by the Sea, Florida
JORGE ECHARTE	229 Commercial Boulevard Lauderdale by the Sea, Florida
STEPHEN A. CALDER	203 S. E. First Street Fort Lauderdale, Florida

ARTICLE VI

OFFICERS

The affairs of the Association shall be administered by officers elected by the Board of Directors at its first meeting following the annual meeting of the members of the Association, which officers shall serve at the pleasure of the board of directors. The names and addresses of the officers who shall serve until their successors are designated by the board of directors are as follows:

President:	FELIX GRANADOS 229 Commercial Boulevard Lauderdale by the Sea, Florida
Vice President and Assistant Secretary:	STEPHEN A. CALDER 203 S. E. First Street Fort Lauderdale, Florida

Secretary-Treasurer: JORGE ECHARTÉ
229 Commercial Boulevard
Lauderdale by the Sea, Florida

ARTICLE VII

INDEMNIFICATION

Every director and every officer of the Association shall be indemnified by the Association against all expenses and liabilities, including counsel fees, reasonably incurred by or imposed upon him in connection with any proceeding to which he may be a party, or in which he may become involved, by reason of his being or having been a director or officer of the Association, or any settlement thereof, whether or not he is a director or officer at the time such expenses are incurred, except in such cases wherein the director or officer is adjudged guilty of willful misfeasance or malfeasance in the performance of his duties; provided that in the event of a settlement the indemnification herein shall apply only when the board of directors approves such settlement and reimbursement as being for the best interests of the Association. The foregoing right of indemnification shall be in addition to and not exclusive of all other rights to which such director or officer may be entitled.

ARTICLE VIII

BY-LAWS

The first By-Laws of the Association shall be adopted by the board of directors, and may be altered, amended or rescinded in the manner provided by the By-Laws.

ARTICLE IX

AMENDMENTS

Amendments to the Articles of Incorporation shall be proposed and adopted in the following manner:

1. Notice of the subject matter of a proposed amendment shall be included in the notice of any meeting at which a proposed amendment is considered.

2. A resolution approving a proposed amendment may be proposed by either the board of directors or by the members of the Association. Directors and members not present in person or by proxy at the meetings considering the amendment may express their approval in writing, providing such approval is delivered to the secretary at or prior to the meeting. Except as elsewhere provided,

(a) such approvals must be not less than 75% of the entire membership of the board of directors and by not less than 75% of the votes of the entire membership of the Association; or

(b) by not less than 80% of the votes of the entire membership of the Association.

3. Provided, however, that no amendment shall make any changes in the qualifications for membership nor the voting

Secretary-Treasurer: JORGE ECHARTE
229 Commercial Boulevard
Lauderdale by the Sea, Florida

ARTICLE VII

INDEMNIFICATION

Every director and every officer of the Association shall be indemnified by the Association against all expenses and liabilities, including counsel fees, reasonably incurred by or imposed upon him in connection with any proceeding to which he may be a party, or in which he may become involved, by reason of his being or having been a director or officer of the Association, or any settlement thereof, whether or not he is a director or officer at the time such expenses are incurred, except in such cases wherein the director or officer is adjudged guilty of willful misfeasance or malfeasance in the performance of his duties; provided that in the event of a settlement the indemnification herein shall apply only when the board of directors approves such settlement and reimbursement as being for the best interests of the Association. The foregoing right of indemnification shall be in addition to and not exclusive of all other rights to which such director or officer may be entitled.

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(a) such approvals must be not less than 75% of the entire membership of the board of directors and by not less than 75% of the votes of the entire membership of the Association; or

(b) by not less than 80% of the votes of the entire membership of the Association.

3. Provided, however, that no amendment shall make any changes in the qualifications for membership nor the voting

rights of members, nor any change in Section 3 of Article III, without approval in writing by all members.

4. A copy of each amendment shall be certified by the Secretary of State and recorded in the public records of Palm Beach County, Florida.

ARTICLE X

TERM

The term of the Association shall be the life of the condominium, unless the Association is terminated sooner by unanimous action of its members. The Association shall be terminated by the termination of the condominium in accordance with the provisions of the Declaration of Condominium.

ARTICLE XI

SUBSCRIBERS

The names and residences of the subscribers of these Articles of Incorporation are as follows:

FELIX GRANADOS	229 Commercial Boulevard Lauderdale by the Sea, Florida
JORGE ECHARTE	229 Commercial Boulevard Lauderdale by the Sea, Florida
STEPHEN A. CALDER	203 S. E. First Street Fort Lauderdale, Florida

IN WITNESS WHEREOF the subscribers have hereto affixed their signatures this 12 day of August, 1970.

FELIX GRANADOS

JORGE ECHARTE

STEPHEN A. CALDER

STATE OF FLORIDA
COUNTY OF BROWARD

BEFORE ME, the undersigned authority, personally appeared FELIX GRANADOS, JORGE ECHARTE and STEPHEN A. CALDER, who, after being duly sworn, acknowledged that they executed the foregoing Articles of Incorporation for the purposes therein expressed, this 12 day of August, 1970.

Doris A. Belton
Notary Public
State of Florida at Large

My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXPIRES APRIL 9, 1971
ISSUED UNDER PUBLIC LAW 93-502

RICHARD (DICK) STONE
SECRETARY OF STATE
The Capitol
Tallahassee, Florida 32304

State of Florida
Department of State



FIRST-CLASS
MAIL
U.S. POSTAGE
PAID 84
PERMIT 616

ANNUAL REPORT
for Corporations and Other Entities

ATTENTION

This is your statutory reminder notice pursuant to F.S. 608.341 to properly complete and mail to us this Annual Report.

ADDRESS CORRECTION
REQUESTED

Please refer to this number for future correspondence regarding this corporation

1507 N. Ocean Dr
Boynton Beach, FL
33435

DATE DUE: JAN. 1, 1973

DATE DELINQUENT: MAR. 1, 1973

NA 719229-16-13 09/01/70

AC LEISUREVILLE LAKE UNIT H
CONDOMINIUM ASSOCIATION INC
229 COMMERCIAL BLVD
LAUDERDALE BY THE SEA FLA 33300

CI TRUST DEPARTMENT

4511 N.E. 111th Ave
7. Lauder...
APR 24 73 33308
PLEASE TYPE 60 217

CHANGE MAILING ADDRESS TO: 40 FIRST BANK AND TRUST
P.O. DRAWER 580
BOYNTON BEACH, FLA 33435

1. LEISUREVILLE LAKE UNIT H Condominium Assn Inc
(Exact Corporate Name) TRUST DEPARTMENT Fed. Emp. I.D. No.

3. 40 FIRST BANK AND TRUST
(Street Address) P.O. DRAWER 580 (City) (County) (State) (Zip)

4. (Officers Names) (Title) (Street Address) (City) (State) (Zip)

(a) WM L. SCHOLZ Pres 1118 Boynton Beach, FL 33435

(b) Harry Haber VP

(c) Mildred Eastman Sec

(d) WM A. Dene... Treas

5. (Directors, Trustees, Managers) (Street Address) (City) (State) (Zip)

(a) Same

6. (Florida Resident Agent Name) (Florida Street Address) (City) (Zip)

WM L. SCHOLZ

7. General Nature of Business 9999 See page 2

8. Date Formed or Incorporated 9/1/70 MO DA YR

9. If Foreign Corporation, Date Qualified in Florida 1/1 MO DA YR

10. Capital Stock (or number and book value of all certificates of interest or participation): SHARES ISSUED

Class or Type	Par or Stated Value	Shares Authorized	Number	Book Value
(a) none				\$
(b)				\$
(c)				\$

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined

12. Fiscal close of accounting period 1 MO DA

13. I/WE declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31, 1972 have been paid as required under Chapter 201, Florida Statutes, and I/WE further declare that this report is true and correct.

(Corporate Seal) Attest: Mildred D. Eastman Secretary or Assistant Secretary

(Corporate Name) By: Harry Haber President or Vice President

Return Original (with Filing Fee) to DEPARTMENT OF STATE
DRAWER 18
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

READ INSTRUCTIONS ON BACK
FILING FEE PER NON-PROFIT ENTITY \$2.00
PER PROFIT ENTITY \$5.00

ANNUAL FILING FEES
 NON-PROFIT CORP
 \$2.00 - NON-PROFIT CORP

CORPORATION ANNUAL REPORT

FORM -1-75 1 897*****2 DC

REMIT THIS FORM & FILING FEE TO:

SECRETARY OF STATE
 THE CAPITOL
 TALLAHASSEE, FLORIDA 32304

CUE—JAN. 1 DELINQUENT—JULY 1 VALIDATION AREA - DO NOT WRITE IN THIS SPACE

1 719229 CHARTER NUMBER

2 DATE INC OR IF FOREIGN DATE QUALIFIED IN FLA

3 SIC CODE SEE ENVELOPE BACK

3a CHANGE TO

4 FED EMPLOYER ID. NO. 59-1446292

5 FISCAL CLOSE OF ACCOUNTING PERIOD (MO)

5a CHANGE TO

YEAR OF LAST REPORT FILED IN THIS OFFICE

YEAR(S) THIS REPORT COVERS
 1974

6 EXACT NAME

LEISUREVILLE LAKE UNIT "H" CONDOMINIUM ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE FOR DIVISION USE ONLY

RECEIVED
 JAN 10 1975

MD 10/9

7 IF RESIDENT AGENT ADDRESS IS DIFFERENT, WRITE THIS OFFICE AT THE ABOVE ADDRESS FOR PROPER FORMS

RESIDENT AGENT AND STREET ADDRESS

**William Scholz
 1118 Lake Terrace
 Boynton Beach, FL**

PLEASE READ INSTRUCTIONS ON BACK

NOTICE: IN THE FUTURE, ALL MAIL WILL BE ADDRESSED TO THE PHYSICAL STREET ADDRESS OF CORPORATION TO COMPLY WITH THIS REQUIREMENT, PLEASE CHANGE THE MAILING ADDRESS TO REFLECT THE PHYSICAL STREET ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS IF NOT ALREADY STATED

8 ADDRESS

**1118 Lake Terrace
 Boynton Beach, FL**

8a CHANGE TO: **Trust Department**

NO PO BOX: **First Bank & Trust
 P.O. Drawer 580
 Boynton Beach, FL**

9 OFFICERS, DIRECTORS NAMES	STREET ADDRESS	CITY / STATE	TITLE(S)
William Scholz	1118 Lake Terrace	Boynton Beach, FL	Pres.
William Doremus	1118 Lake Terrace	Boynton Beach, FL	Trea.
Eugene Lounsbury	1118 Lake Terrace	Boynton Beach, FL	Bd. Mem.
Mildred Eastman	1118 Lake Terrace	Boynton Beach, FL	Sec.

10 CAPITAL STOCK

CAPITAL STOCK OWNERS: NUMBER, NAME, ADDRESS, AND PERCENTAGE OF OWNERSHIP

CLASS OR TYPE	PAR OR STATED VALUE	SHARES AUTHORIZED	NUMBER OF SHARES	VALUE

IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES. I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT

AUTHORIZED SIGNATURE

FIRST BANK AND TRUST
 1118 BOYNTON BEACH, FLA 33435 TEL. NO. _____

DATE: *Jan 10 1975*

CORP. ARTS

CORPORATION ANNUAL REPORT

REV. 18-75 1 009*****7 00

HOME THIS FORM A FILING FEE TO

SECRETARY OF STATE THE CAPITOL TALLAHASSEE, FLORIDA 32304

1 CHARTER NUMBER **19229**

2 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA. **8-18-70.**

3 SICC SEE ENVELOPE BACK **8699**

3a CHANGE TO:

4 FED. EMPLOYER ID. NO. **59-1446292**

4a CHANGE TO:

5 FISCAL CLOSE OF ACCOUNTING PERIOD (MO)

5a CHANGE TO:

1974 YEAR OF LAST REPORT FILED IN THIS OFFICE

1975 YEAR(S) THIS REPORT COVERS

6 EXACT NAME **Leisureville Lake Unit "H" Condominium Assn. Inc.**

7 RESIDENT AGENT AND STREET ADDRESS
 IF RESIDENT AGENT AND/OR ADDRESS IS DIFFERENT, WRITE THIS OFFICE AT THE ABOVE ADDRESS FOR PROPER FORMS
Scholz, Wiltzans & 1118 Lake Terrace Boynton Bch. Fl.

DO NOT WRITE IN THIS SPACE FOR DIVISION USE

PLEASE READ INSTRUCTIONS ON BACK

8 ADDRESS **1118 Lake Terrace Boynton Bch, FL 33435**

8a CHANGE TO: **c/o First Bank & Trust Trust Department P.O. Drawer 580 Boynton Bch, FL 33435**

NO P.O. BOX

NOTICE IN THE FUTURE ALL MAIL WILL BE ADDRESSED TO THE PRINCIPAL STREET ADDRESS OF CORPORATION TO COMPLY WITH THIS REQUIREMENT PLEASE CHANGE THE MAILING ADDRESS ON ALL EXISTING PHYSICAL STREET ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS IF NOT ALREADY STATED.

9 OFFICERS/DIRECTORS NAMES	STREET ADDRESS	CITY / STATE	TITLE(S)
William Scholz	1118 Lake Terrace	Boynton Bch, FL	Pres,
Gene Lounsbury	1118 Lake Terrace	Boynton Bch, FL	V.P.
William Doremus	1118 Lake Terrace	Boynton Bch, FL	Treas.
Benjamin Helford	1118 Lake Terrace	Boynton Beach, FL	Sec.

10 CAPITAL STOCK

N/A

11a CAPITAL STOCK (OR NUMBER BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATIONS) CLASS OR TYPE PAR NO PAR OR STATED VALUE SHARES AUTHORIZED NUMBER BOOK VALUE

(1) \$

(2) \$

IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

11b I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES. I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE *William R. Scholz*

TITLE **President** TEL NO: **757-1373**

DATE **June 30, 1975**

CORP 1074



STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**CORPORATION ANNUAL REPORT
1976**

Bruce A. Smathers
Secretary of State
Form COR 620 (8-76)

THIS REPORT MUST BE ACCOMPANIED BY A \$5 FEE.

APPROVED SEP 27-76 397*****

AND
FILED OCT 30 1976

NOV 3 11 22 AM 1976

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

▶ READ LETTER AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

1. Name and Address of Corporation Principal Office:

719229 LEISUREVILLE LAKE
UNIT H CONDOMINIUM ASSOCIATION
1118 LAKE TERRACE
BOYNTON BEACH, FL

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

5/0 First Bank and Trust
Street Address
114 N. Federal Highway
P.O. Box No. P. O. Box Y, Trust Dept.

City
Boynton Beach

State FL Zip Code 33435

3. Date Incorporated or Qualified To Do Business in Florida

09/01/1970

4. Federal Employer Identification Number (FEIN)

59-1446292

5. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SCHOLZ, WILLIAM L	PRES	DIR	1118 LAKE TERRACE	BOYNTON BEACH, FL
DORÉMUS, WILLIAM	PRES		1118 LAKE TERRACE	BOYNTON BEACH, FL
DOPPEL, BESS	SEC		1118 LAKE TERRACE	BOYNTON BEACH, FL
GUNSBURY, EUGENE	V.P.		1118 LAKE TERRACE	BOYNTON BEACH, FL
FERGUSON, ANNE		DIR	1118 Lake Terrace	Boynton Beach, FL
WELSCH, FRED		DIR	1118 Lake Terrace	Boynton Beach, FL
ROSSRUCKER, HOWARD		DIR	1118 Lake Terrace	Boynton Beach, FL

6. Registered Agent Information

Name
FIRST BANK AND TRUST
Street Address (Do NOT Use P.O. Box Number)
114 North Federal Highway
City, State and Zip Code
Boynton Beach, FL 33435

7. An Officer of The Corporation Must Sign This Report. This Report Must Be Signed By The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Typed Name of Signing Officer
WILLIAM A. DORÉMUS

Title
TREASURER

Telephone Number
805/732-7000 Ext. 182

Date
9-17-76

William A. Dorémus, Treasurer

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE



STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



CORPORATION ANNUAL REPORT
AND DISSOLUTION NOTICE

Bruce A. Smathers
Secretary of State

1977

Form COR 620 (B-77)

THIS REPORT MUST BE ACCOMPANIED BY A \$5 FEE.

SEP 23 5 19 PM 1977

STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:

719229 LEISUREVILLE LAKE
UNIT H CONDOMINIUM ASSOCIATION
C/O FIRST BANK AND TRUST
114 N. FEDERAL HWY, BOX Y TRUST
BOYNTON BEACH, FL 33435

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State

Zip Code

3. Date Incorporated or Qualified To Do Business in Florida

09/01/1970

4. Federal Employer Identification Number (FEIN)

59-1446292

5. Date of Last Report

1976

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (X)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SCHOLZ, WILLIAM L	PRES	DIR	1118 LAKE TERRACE	BOYNTON BEACH, FL
DREMUS, WILLIAM	TRES		1118 LAKE TERRACE	BOYNTON BEACH, FL
DOPPE, BESS	SEC		1118 LAKE TERRACE,	BOYNTON BEACH, FL
LOUNSBURY, EUGENE	V.P.		1118 LAKE TERRACE	BOYNTON BEACH, FL
FIRST BANK AND TRUST	DIR		1118 LAKE TERRACE	BOYNTON BEACH, FL
WELSH, JERED	DIR		1118 LAKE TERRACE	BOYNTON BEACH, FL
Anna Brewer	Dir		1118 Lake Terrace	Boynton Beach
Joseph Grossman			1118 Lake Terrace	Boynton Beach

7. Registered Agent Information

If you wish to change Registered Agent on this form, enter all new information here

Name

FIRST BANK AND TRUST

City, State and Zip Code

BOYNTON BEACH, FL 33435

Street Address (Do NOT Use P.O. Box Number)

114 N. FEDERAL HWY.

Name

City, State and Zip Code

Street Address (Do NOT Use P.O. Box Number)

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Typed Name of Signing Officer

Eugene V. Lounsbury

Title

Vice-President

Telephone Number

757-2749

Signature

Eugene V. Lounsbury

Date

September 12, 1977

SE 9-23-77

corp-32

NP # 19,229

John

LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION, INC.

(^{XX}) New Corporation () Reincorporation () Amendment (\$617.02)

Filed:

Sept 1, 1970

By:

R. W. Morrison, Ft. Lauderdale

pd

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS \$10.

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATION ANNUAL REPORT
1978



Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE (Form COR 620) 12-1-77

JUN 30 1978
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

▶ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

<p>1. Name and Address of Corporation Principal Office:</p> <p>719229 LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION C/O FIRST BANK AND TRUST 114 N. FEDERAL HWY, BOX Y TRUST BOYNTON BEACH, FL 33435</p> <p>If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.</p>	<p>2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient</p> <p>Street _____</p> <p>P.O. Box _____</p> <p>City _____</p> <p>State _____</p>
---	---

<p>3. Date Incorporated or Qualified To Do Business in Florida</p> <p>09/01/1970</p>	<p>4. Federal Employer Identification Number (FEIN)</p> <p>59-1446292</p>	<p>5. Date of Last Report</p> <p>1977</p>
--	---	---

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SCHOLZ, WILLIAM L	Pres	X	1118 LAKE TERRACE	BOYNTON BEACH, FL
Quinn, Joseph H.	TRES	X	1118 LAKE TERRACE	BOYNTON BEACH, FL
DOPPE, BESS	SEC	X	1118 LAKE TERRACE.	BOYNTON BEACH, FL
Heenan, Edmund R.	V.P.	X	1118 LAKE TERRACE	BOYNTON BEACH, FL
BREWER, ANNA	DIR	X	1118 LAKE TERRACE	BOYNTON BEACH, FL
GROSSMAN, JOSEPH	DIR	X	1118 LAKE TERRACE	BOYNTON BEACH, FL
Silverman, Morris	A. Tres	X	1118 Lake TERRACE	BOYNTON BEACH, FL
ROSSRUCKER, HOWARD		X	1118 Lake TERRACE	BOYNTON BEACH, FL
REED, BERT		X	1118 LAKE TERRACE	BOYNTON BEACH, FL

<p>7. Registered Agent Information</p> <p>If you wish to change Registered Agent on this form, enter all new information here ▶</p>	<p>Name FIRST BANK AND TRUST</p> <p>Street Address (Do NOT Use P.O. Box Number) 114 N. FEDERAL HWY.</p> <p>City, State and Zip Code BOYNTON BEACH, FL 33435</p> <hr/> <p>Name _____</p> <p>Street Address (Do NOT Use P.O. Box Number) _____</p> <p>City, State and Zip Code _____</p>
---	--

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 807 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

<p>Typed Name of Signing Officer</p> <p>Joseph H. Quinn</p>	<p>Title</p> <p>Treas.</p>	<p>Telephone Number</p> <p>305-732-7000 ext. 180</p>
<p>Signature</p> <p><i>Joseph H. Quinn</i></p>		<p>Date</p> <p>January 6, 1978</p>

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS \$10.

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS \$10.

CORPORATION
ANNUAL REPORT



STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1979

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE.

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED

MAY 25 10 41 AM '79

FLORIDA DEPT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Officer:

719229
LEISUREVILLE LAKE UNIT H
C/O FIRST BANK AND TRUST
114 N. FEDERAL HWY, BOX Y TRUST DEPT
BOYNTON BEACH, FL 33435

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address
551 S.E. 8th Street
P.O. Box No.
P.O. Box JJ
City
Delray Beach,
State
FL Zip Code
33444

3. Date Incorporated or Qualified To Do Business in Florida

9/01/1970

4. Federal Employer Identification Number (FEIN)

59-1446292

5. Date of Last Report

1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SCHOLZ, WILLIAM L	X P/O	1118 LAKE TERRACE	BOYNTON BEACH, FL
QUINN, JOSEPH H.	X T/D	1118 LAKE TERRACE	BOYNTON BEACH, FL
Eastman, Mildred	X S/D	1118 LAKE TERRACE.	BOYNTON BEACH, FL
Rossrucker, Howard	X V/D	1118 LAKE TERRACE	BOYNTON BEACH, FL
BREVER, ANNA	X D	1118 LAKE TERRACE	BOYNTON BEACH, FL
GROSSMAN, JOSEPH	X D	1118 LAKE TERRACE	BOYNTON BEACH, FL

7. Registered Agent Information

If you wish to change Registered Agent on this form, enter all new information below.

Name
FIRST BANK AND TRUST
Street Address (Do NOT Use P.O. Box Number)
114 N. FEDERAL HWY.
City, State and Zip Code
BOYNTON BEACH, FL 33435

Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

8. See signature restrictions under instructions on reverse side of this form.

DO NOT WRITE IN THIS SPACE

or Trustee Empowered to Execute
That I Understand My Signature On
under Oath.

✓ Joseph H. Quinn
Treas

Joseph Quinn
Telephone Number
732-1374
3/7/79

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

**CORPORATION
ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

DO NOT WRITE IN THIS SPACE

FILED

APR 18 23 AM 1980

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

**READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT**

<p>1. Name and Address of Corporation Principal Office:</p> <p>719229 LEISUREVILLE LAKE UNIT H 551 S.E. 8TH ST. P.O. BOX JJ DELRAY BEACH, FL 33444</p> <p>If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.</p>	<p>2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.</p> <p>Street Address _____</p> <p>P.O. Box No. _____</p> <p>City _____</p> <p>State _____ Zip Code _____</p>
--	---

<p>3. Date Incorporated or Qualified To Do Business in Florida</p> <p>9/01/1970</p>	<p>4. Federal Employer Identification Number (FEIN)</p> <p>59-1446292</p>	<p>5. Date of Last Report</p> <p>1979</p>
---	---	---

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SCHOLZ, WILLIAM L.	P/	1118 LAKE TERRACE	BOYNTON BEACH, FL
Lounsbury, Marie	T/	1118 LAKE TERRACE	BOYNTON BEACH, FL
Miriam Keating	S/	1118 LAKE TERRACE.	BOYNTON BEACH, FL
Ferguson, Ann	V/	1118 LAKE TERRACE	BOYNTON BEACH, FL
BREWER, ANNA	D	1118 LAKE TERRACE	BOYNTON BEACH, FL
Haber, Harry	D	1118 LAKE TERRACE	BOYNTON BEACH, FL
Stan Leatherdale	D	1118 Lake Terrace	BOYNTON BEACH, FL
Ida Balduini	D	1113 Lake Terrace	BOYNTON BEACH, FLA
Morris Silverman	D	1118 Lake Terrace	BOYNTON BEACH, FL

7. Registered Agent Information

<p>NAME FIRST BANK AND TRUST</p> <p>Street Address (Do NOT Use P.O. Box Number) 114 N. FEDERAL HWY.</p> <p>City, State and Zip Code BOYNTON BEACH, FL 33435</p>	<p>To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.</p>
---	--

8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

<p>Typed Name of Signing Officer William Scholz</p>	<p>Title President</p>	<p>Telephone Number 305-737-0373</p>
<p>Signature <i>William L. Scholz</i></p>		<p>Date 2/29/80</p>

DO NOT WRITE IN THIS SPACE

4 1 80

719229 03-12-SC 2 5 933 10.00

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

MAY 22 8 15 AM '81

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1981

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1 Name and Address of Corporation Principal Office.

719229
LEISUREVILLE LAKE UNIT H
551 S.E. 8TH ST.
P.O. BOX JJ
DELRAY BEACH, FL

33444

If above address is incorrect in any way, enter the correct address
in item 2 (includes Zip Code).

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No

City

State

Zip Code

3 Date incorporated or Qualified To Do Business in Florida

9/01/1970

4 Federal Employer Identification Number (FEIN)

59-1446292

5 Date of Last Report

1980

6 Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SCHOLZ, WILLIAM L	P	1118 LAKE TERRACE	BOYNTON BEACH, FL
LOUNSBURY, MARIE	T	1118 LAKE TERRACE	BOYNTON BEACH, FL
KEATING, MIRIAM	S	1118 LAKE TERRACE	BOYNTON BEACH, FL
FERGUSON, ANN	V	1118 LAKE TERRACE	BOYNTON BEACH, FL
BREWER, ANNA	D	1118 LAKE TERRACE	BOYNTON BEACH, FL
HABER, HARRY	D	1118 LAKE TERRACE	BOYNTON BEACH, FL

Registered Agent Information

Name

FIRST BANK AND TRUST

Street Address (Do NOT Use P.O. Box Number)

114 N. FEDERAL HWY.

City, State and Zip Code

BOYNTON BEACH, FL

33435

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 807 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Name of Signing Officer

Title

Telephone Number

Date

719229 04-01-81 2 3 415 10.00

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION
ANNUAL REPORT
1982



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

George F. Brantley
Secretary of State

APPROVED
AND
FILED

Nov 11 10 57 AM 1982

Read Notice and Instructions on Other Side Before Making Entries.
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

719229
LEISUREVILLE LAKE UNIT H
551 S.E. 8TH ST.
P.O. BOX JJ
DELRAY BEACH, FL

33444

1118 Lake Terrace

Boynton Beach,

FL

33435

09/01/1970

59-1446292

05/22/1981

SCHOLZ, WILLIAM L	P	1118 LAKE TERRACE	BOYNTON BEACH, FL
LOUNSBURY, MARIE	T	1118 LAKE TERRACE	BOYNTON BEACH, FL
KEATING, MIRIAM	S	1118 LAKE TERRACE.	BOYNTON BEACH, FL
FERGUSON, ANN	V	1118 LAKE TERRACE	BOYNTON BEACH, FL
BREWER, ANNA	D/V	1118 LAKE TERRACE	BOYNTON BEACH, FL
HABERT, HARRY	D	1118 LAKE TERRACE	BOYNTON BEACH, FL
DUFFY, JOHN	D	1118 LAKE TERRACE	BOYNTON BEACH, FL
QUINN, JOSEPH	T	1118 LAKE TERRACE	BOYNTON BEACH, FL
SILVERMAN, MORRIS	D	1118 LAKE TERRACE	BOYNTON BEACH, FL
ROSSRUCKER, HOWARD	D	1118 LAKE TERRACE	BOYNTON BEACH, FL
LEATHERDALE, STANLEY	D	1118 LAKE TERRACE	BOYNTON BEACH, FL
BALDUINI, IDA	D	1118 LAKE TERRACE	BOYNTON BEACH, FL

Registered Agent Information

FIRST BANK AND TRUST

114 N. FEDERAL HWY.

BOYNTON BEACH, FL

33435

Name Change of Bank
Florida Coast Bank of Palm Beach County

551 S.E. 8th Street

Delray Beach, FL 33444

This report is the property of Sections 607.004 and 607.005 Florida Statutes. The undersigned corporation, organized under the laws of the State of Florida, hereby certifies that it has the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

Name Change of Bank

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

\$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form.

Wholly True I am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. of the Statutes of Florida. My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Signature: *Joseph Quinn*
JOSEPH H. QUINN TREASURER

Date: NOV 4, 1982
Telephone Number: 732-1374

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

1983



George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APR 11 1983

Read Notice and Instructions on Other Side of
Filing Fee of \$10 Required - Make Check Payable to

Filing Entries
Secretary of State

Name and Address of Corporation Principal Office

719229
LEISUREVILLE LAKE UNIT H
1118 LAKE TERRACE
BOYNTON BEACH, FL 33435

Enter Change of Address of Corporation Principal Office
Office O Box Number None NOT Sufficient
State Fresh

PO BOX No
City
State Zip Code

If new address is received in any way, enter the correct address
in item 2. Include Zip Code

1. Date of Original
Filing in Florida

09/01/1970

4. Federal Employer
Identification Number (FEIN)

59-1446292

5. Date of
Last Report

11/11/1982

Name and Address of Each Officer and Director

Name and Address of Each Officer and Director	Type	Street Address of Each Officer and Director (Do NOT use Post Office Box Numbers)	City and State
KEATING, MIRIAM	S	1118 LAKE TERRACE	BOYNTON BEACH, FL 0000
QUINN, JOSEPH	T	1118 LAKE TERRACE	BOYNTON BEACH, FL 0000
DUFFY, JOHN	DP	1118 LAKE TERRACE	BOYNTON BEACH, FL 0000
SILVERMAN, MORRIS	D	1118 LAKE TERRACE	BOYNTON BEACH, FL 0000
SCHOLZ, WILLIAM L	DN	1118 LAKE TERRACE	BOYNTON BEACH, FL 0000

Registered Agent Information

1. Name and Address of Former Registered Agent

2. Name and Address of New Registered Agent

FLORIDA COAST BANK OF PALM BCH COUNTY
551 SE 8TH STREET

33444

Under provisions of Sections 807.011 and 807.012 Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, do hereby designate the undersigned as its registered agent or both in the State of Florida.

This designation is subject to withdrawal or amendment by the corporation.

Registered Agent Accepting Appointment

DATE

\$3.00 additional fee required for Registered Agent changes.

See signature instructions and instructions on the reverse side of this form.

This is a change of the Corporation's Registered Agent. You are required to Exhibit this Report as required by Chapter 619 F.S. to the Department of State. Do not receive a return from the State until you have the return filed with the Department of State.

John P. Duffy
John P. Duffy

11/11/82
11/11/82

DUE DATE ON OR AFTER JANUARY 1 (DEFERRED AFTER JULY 1 OF EACH YEAR)

CORPORATION
ANNUAL REPORT
1984



FLORIDA DEPARTMENT OF STATE
George F. Healy
Secretary of State
DIVISION OF CORPORATIONS

MAILED 20 20 PM 1984

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office		2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient	
719229 LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOC 1118 LAKE TERRACE BOYNTON BEACH, FL 33435		Street Address	
If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code		P.O. Box No.	
		City	
		State Zip Code	

3 Date incorporated or Qualified To Do Business in Florida	09/01/1970	4 Federal Employer Identification Number (FEIN)	59-1446292	5 Date of Last Report	04/11/1983
--	------------	---	------------	-----------------------	------------

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1983				
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	Zip Code
SILVERMAN, MORRIS	O	1118 LAKE TERRACE	BOYNTON BCH, FL	0000
QUINN, JOSEPH	T	1118 LAKE TERRACE	BOYNTON BCH, FL	0000
BUFFY, JOHN	D	1118 LAKE TERRACE	BOYNTON BCH, FL	0000
SCHOLZ, WILLIAM L	D	1118 LAKE TERRACE	BOYNTON BCH, FL	0000
KEATING, MIRIAM	D	1118 LAKE TERRACE	BOYNTON BCH, FL	0000
EDMUND R. KEENAN	P	" "	BOYNTON BCH, FL	0000
ANNA FERGUSON	V.P.	" "	BOYNTON BCH, FL	0000
MORRIS SILVERMAN	D	" "	BOYNTON BCH, FL	0000

Registered Agent Information	
7 Name and Address of Current Registered Agent	8 Name and Address of New Registered Agent
FLORIDA COAST BANK OF PALM BCHCOUNTY 551 SE 8TH STREET DELRAY BEACH, FL 33444	Name
	Street Address (Do NOT Use P.O. Box Number)
	City, State and Zip Code

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10 See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 601 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath

Signature	<i>Edmund R. Keenan, MD</i>	Date	2/7/84
Typed Name of Signing Officer	Edmund R. Keenan	Telephone Number	305-737-0073
	Title		President

11 Should you desire a certificate of status check the box below and include an additional \$5.00 with your payment

CERTIFICATE OF STATUS DESIRED
\$5 Additional fee required for certificates

ANNUAL REPORT
1985



Department of
Corporate Affairs
Office of the Secretary of State

FILED

Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

739224 7
LEYSUFVILLE LAKE UNIT H CONDOMINIUM ASSOC
3118 LAKE TERRACE
BOYNTON BEACH, FL 33435

If above address is incorrect, in any way, enter the correct address
of record, including Zip Code.

State of Florida
Secretary of State

09/03/1970

Factor's Corporation
Specialized Financial Services

57-1446293

Date of
Last Report

05/17/1984

Name of Officer and Directors	Title	Home Address of Each Officer and Director (Use R.R. 1 and Post Office Box Numbers)	City and State	
1 SILVERMAN, MORRIS	<i>PR</i>	1118 LAKE TERRACE	BOYNTON BCH, FL	0260
2 QUINN, JOSEPH Quinn, Joseph	Arst. T.	1118 LAKE TERRACE Samo	BOYNTON BCH, FL Samo	0260
3 HEENAN, EDMUND P	P	1118 LAKE TERRACE	BOYNTON BCH, FL	0260
4 ROBINSON, ANNA Marie Lounsbury	T	1118 LAKE TERRACE Samo	BOYNTON BCH, FL Samo	0260
5 SILVERMAN, MORRIS Fritz A. Wrede	D S	1118 LAKE TERRACE Samo	BOYNTON BCH, FL Samo	0260

Registered Agent Information

Name and Address of Current Registered Agent	Name and Address of New Registered Agent
FLORIDA COAST BANK OF PALM BEACH COUNTY 551 SE 8TH STREET DELRAY BEACH, FL 33444	Name: Donald J. Gronko Street Address (Do NOT Use P.O. Box Number): 306 NE 2nd Ave. City, State and Zip Code: Boynton Beach, Fla. 33435

I, the undersigned, being a resident of the State of Florida, do hereby certify that the above-named corporation, organized under the laws of the State of Florida, is in good standing for the purpose of changing its registered officer or registered agent, or both, in the state of Florida. My change was authorized by resolution duly adopted by its board of directors on _____ and I hereby accept the appointment of registered agent herein named, and accept the obligations of Section 607.325 F.S.

Registered Agent Accepting Appointment: _____ DATE: _____

\$100 additional fee required for Registered Agent changes.

See signature instructions under instructions on reverse side of this form.

Verify that all an officer of the Corporation, the Receiver or Trustee designated in Execute This Report as Required by Chapter 607 F.S. with authority that I understand my signature on this Report shall have the same legal effects as if made under oath. (Made obligatory by the laws of Section 607.325 F.S.)

Morris Silverman

Date: 3-22-85

Morris Silverman

Vice President

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1986



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

RECEIVED
MAR 7 1986
FILED

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office		2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient	
719229 LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION 1118 LAKE TERRACE BOYNTON BEACH, FL 33435		Street Address 21 P.O. Box No. 22 City and State 23 Zip Code 24	
If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code			

3 Date Incorporated or Qualified To Do Business in Florida	09/01/1970	4 Federal Employer Identification Number (FEIN)	59-1446292	5 Date of Last Report	03/28/1985
--	------------	---	------------	-----------------------	------------

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1985				
1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State	5
SILVERMAN, MORRIS	V.P.	1118 LAKE TERRACE	BOYNTON BCH, FL	00000
WELSCHE, FRANCIS	DIT	1118 LAKE TERRACE	BOYNTON BCH, FL	00000
HEENAN, EDUND R	P	1118 LAKE TERRACE	BOYNTON BCH, FL	00000
HOWELL, ANNA H	F O	1118 LAKE TERRACE	BOYNTON BCH, FL	00000
LOUNSBURY, MARCE	D/S	1118 LAKE TERRACE	BOYNTON BCH, FL	00000
WREDE, FRITZ A.	D/S	1118 LAKE TERRACE	BOYNTON BCH, FL	00000

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent		8 Name and Address of New Registered Agent	
GROMKO, DONALD J. 306 NE 2ND AVENUE BOYNTON BEACH, FL. 33435		Name 81 Street Address (Do NOT Use P.O. Box Number) 82 City and State 83 FL. Zip Code 84	

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent or both in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____
I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ (Registered Agent Accepting Appointment) DATE _____

\$3.00 additional fee required for Registered Agent changes.

10 See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath. (Officer signing must be listed in Block 6)

Signature	Date
<i>Fritz A. Wrede</i>	2/23 '86
Type Name of Signer (Officer)	Title
FRITZ A. WREDE	SECY

11 Would you desire a certificate of status check the box \$5 Additional Fee required for a

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

DO NOT WRITE IN THIS SPACE

CORPORATION

ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Read Matter and Instructions on Other Side Before Making Entries
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

719229 7
LETSUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION
1118 LAKE TERRACE
BOYNTON BEACH, FL 33435

If above address is incorrect in any way, enter the correct address in item 2, include Zip Code

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date of Incorporation or Qualified Business in Florida: 09/01/1970

4 Federal Employer Identification Number (FEIN): 59-1446292

5 Date of Last Report: 03/07/1986

6 Name and Street Address of Each Officer and Director as of December 31, 1986

7 Name of Officers and Directors	8 Title	9 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	10 City and State
SILVERMAN, MARIS	V	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
WELSON, FRANCIS	D/T	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
WELSON, MARY	P	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
HUELL, ANNA	D	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
WREDE, FRITZ A.	D/S	1118 LAKE TERRACE	BOYNTON BCH, FL 00000

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

DAVID J. DONALD J.
516 E 2ND AVENUE
BOYNTON BEACH, FL 33435

11 Name and Address of New Registered Agent

Name 11

Street Address 1 (Do NOT Use P.O. Box Number) 12

Street Address 2 (Do NOT Use P.O. Box Number) 13

City and State 14

Zip Code 15

FL

I, the undersigned, Secretary of State, certify that the above-named corporation, incorporated under the laws of the State of Florida, submits herewith to the Bureau of Corporations and Chartered Offices, the required annual report for the year 1986.

Registered Agent Accepting Appointment DATE

\$1.00 additional fee required for Registered Agent change

16 Signature of Secretary of State

17 Date

18 Telephone Number

19 Signature of Registered Agent

20 Date

21 Telephone Number

\$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

DO NOT WRITE IN THIS SPACE

CORPORATION

ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Filing Fee of \$25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office 719229 LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION 1118 LAKE TERRACE BOYNTON BEACH, FL 33406	2. Enter Change of Address of Corporation Principal Office, P.O. Box Number None if NOT Supported Street Address 21 P.O. Box No. 22 City and State 23 Zip Code 24
If above address is incorrect in any way, enter the correct address at item 2. Include Zip Code.	

3. Date Incorporated or Qualified To Do Business in Florida 09/01/1970	4. Federal Employer Identification Number (FEIN) 59-1446292	5. Date of Last Report 03/11/1987
---	---	--------------------------------------

6. Names and Street Addresses of Each Officer and Director as of December 31, 1987

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SMITH, ROBERT	VP	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
LEUNG THT, MARIE	P	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
TOTH, MARY	P	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
HOWELL, ANNA	D	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
SMITH, RUTH	S	1118 LAKE TERRACE	BOYNTON BCH, FL 00000

REGISTERED AGENT INFORMATION		7. Name and Address of Current Registered Agent JIRONKO, DONALD J. 306 NE 2ND AVENUE BOYNTON BEACH, FL. 33435	8. Name and Address of New Registered Agent Name 81 Street Address 1 (Do NOT Use P.O. Box Numbers) 82 Street Address 2 (Do NOT Use P.O. Box Numbers) 83 City and State 84 Zip Code 85 FL
-------------------------------------	--	--	--

9. Pursuant to the provisions of Sections 607.024 and 607.027, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agents, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

10. Names and the addresses of registered agent Jim Smith, and about the compliance of Section 607.025 FS

SIGNATURE: *Robert Smith* DATE: 4/15/88
(Registered Agent Accepting Appointment)

11. I, a duly authorized officer of the corporation, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief.

12. I certify that I am an Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. My name (and that of any person whose signature on this Report shall have the same legal effect as if made by me) is _____.

Signature: *Robert Smith* Title: Secretary

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

APPROVED AND FILED

MAR 11 11:15

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

PARTIAL

CORPORATION
ANNUAL REPORT
1989



FLORIDA DEPARTMENT OF STATE
1901 Suwannee
Secretary of State
DIVISION OF CORPORATIONS

Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

Name and Address of Corporation Principal Office
 ZIP + 4
 719229 7
LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION
1118 LAKE TERRACE
BOYNTON BEACH, FL 33426-4213

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient!

Street Address 21

P.O. Box No 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2, include Zip Code

1. Date of Annual Report Prepared (If Not Prepared in Florida) **09/01/1970**

3. Federal Employer Identification Number (FEIN) **59-1446292**

5. Date of Last Report **04/22/1988**

1	2	3	4
NAME	Name of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use P.O. Box Numbers)	City and State
V/P	AYRES, ROBERT	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
T	LOUNSBURY, MARIE	1118 LAKE TERRACE	BOYNTON BCH, FL 00000
P	TOTH, MARY D	1118 LAKE TERRACE 201	BOYNTON BCH, FL 00000
D	HOWELL, ANNA D	1118 LAKE TERRACE 111	BOYNTON BCH, FL 00000
S	DUFFY, RUTH D	1118 LAKE TERRACE 202	BOYNTON BCH, FL 00000

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent
GROMKO, DONALD J.
106 NS 2ND AVENUE
BOYNTON BEACH, FL. 33435

2. Name and Address of Prior Registered Agent (Name)

Street Address (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

Zip Code 85

FL

I, the undersigned, the Secretary of State of Florida, do hereby certify that the above information was received from the Secretary of State of Florida, and that the same is true and correct as the same appears on the records of the Secretary of State of Florida.

DATE: _____

The undersigned hereby certifies that the above information is true and correct as the same appears on the records of the Secretary of State of Florida.

Signature: *[Handwritten Signature]*
 Date: **February 9, 1989**
 774-1111

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

PS000707

CORPORATION

ANNUAL REPORT
1990



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation or Principal Office

719229 7

ZIP + 4 PRESORT
LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION
1118 LAKE TERRACE
BOYNTON BEACH, FL 33426-4213

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The name of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida

09/01/1970

4 FEE Number

59-1446292

FEE Number Applied For
FEE Number Not Applicable

5 Name and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
V/P	AYRES, ROBERT	1118 LAKE TERRACE 216	BOYNTON BCH, FL 00000
T	LOUNSBURY, MARIE	1118 LAKE TERRACE 213	BOYNTON BCH, FL 00000
P/D	TOTH, MARY	1118 LAKE TERR 201	BOYNTON BCH, FL 00000
D	HOWELL, ANNA	1118 LAKE TERR 111	BOYNTON BCH, FL 00000
S	DUFFY, RUTH	1118 LAKE TERR 202	BOYNTON BCH, FL 00000

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

GROMKO, DONALD J.
306 NE 2ND AVENUE
BOYNTON BEACH, FL. 33435

8 Name and Address of New Registered Agent

Name 61
Donald J. Gromko
Street Address 1 (Do NOT Use P.O. Box Numbers) 62
306 NE 2nd Avenue
Street Address 2 (Do NOT Use P.O. Box Numbers) 63

City and State 64
Boynton Beach FL
Zip Code 65
33435

I, the undersigned, do hereby certify that the information furnished on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made by the person or persons authorized by resolution or vote of the board of directors on December 13, 1989.

I have caused the appointment of registered agent to be made in accordance with and accept the obligations of Section 607.325.

SIGNATURE (Registered Agent Accepting Appointment)

Donald J. Gromko DATE 3/8/90

I, the undersigned, do hereby certify that the information furnished on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made by the person or persons authorized by resolution or vote of the board of directors on December 13, 1989.

Signature
Ruth Duffy

Date
2/12/90

Typed Name of Signing Officer or Director

Title

Telephone Number

Ruth Duffy

Secretary

734-6129

\$5 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

TALLAHASSEE
FILED

FILING FEE OF \$61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation **DOCUMENT # 719229 (7)**
ZIP + 4 PRESORT
LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION, INC.
1118 LAKE TERRACE
BOYNTON BEACH, FL 33426-4213

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment

21 Street Address
22 P.O. Box No.
23 City and State
24 Zip Code

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code

3. Date incorporated or Qualified To Do Business in Florida: **09/01/1970**
4. FEI Number: **59-1446292**
FEI Number Applied For: _____
FEI Number Not Applicable: _____
5. **\$8.75** Additional Fee required for a Certificate of Status
CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use P.O. Office Box Numbers)	City and State
V/P - D	AYRES, ROBERT	1118 LAKE TERR 216	BOYNTON BCH, FL 00000
T - D	LOUNSBURY, MARIE	1118 LAKE TERR 213	BOYNTON BCH, FL 00000
P/D - D	TOTH, MARY	1118 LAKE TERR 201	BOYNTON BCH, FL 00000
D	HOWELL, ANNA	1118 LAKE TERR 111	BOYNTON BCH, FL 00000
S - D	DUFFY, RUTH	1118 LAKE TERR 202	BOYNTON BCH, FL 00000

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registering Agent
GROMKO, DONALD J.
308 NE 2ND AVENUE
BOYNTON BEACH, FL. 33435

8. Name and Address of New Registered Agent

81 Name
82 Street Address 1 (Do NOT Use P.O. Box Number)
83 Street Address 2 (Do NOT Use P.O. Box Number)
84 City
85 Zip Code

I, the undersigned, being a duly qualified and authorized officer or director of the corporation, hereby certify that the information contained on this annual report is true and accurate and that my signature shall have the same legal effect as if signed by the corporation. I am authorized by the corporation to execute this report as required by Chapter 607, Florida Statutes.

9. Signature of Registering Agent: _____ DATE: _____

MARY TOTH

PRESIDENT

Telephone Number (Daytime)
407 732-2353

DATE **Feb 6, 1991**

FILING FEE OF \$61.25 REQUIRED - Make Checks Payable To: Secretary of State **\$8.75 Additional Fee required for a Certificate of Status**

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1992



DEPARTMENT OF STATE
OFFICE OF
CORPORATIONS
DIVISION OF CORPORATIONS

FORM 600
SEC. OF STATE
CORPORATIONS
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

FILING FEE \$61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Mailing Address of Corporation: **DOCUMENT #719229 (7)**
LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION, INC.
1118 LAKE TERRACE
BOYNTON BEACH FL 33426-4213

2. If address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. If it is acceptable, the NAME of the corporation can be changed only by filing an amendment.
21 Mailing Address
22 P.O. Box No.
23 City and State
24 Zip

3. Date incorporated or qualified to do business in Florida: **09/01/1970**

3a. Date of Last Report: **02/26/1991**
4. FEI Number: **59-1446292**
FEI Number Applied For: **\$6.75**
FEI Number Fee Applied: **CERTIFICATE OF STATUS DUES**

6. Mailing Street Address of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1	2	3	4
	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
V/D	AYRES, ROBERT - OMIT ADD- James Armstrong	1118 LAKE TERR 216	BOYNTON BCH, FL 00000
T/D	LOUNSBURY, MARIE - OMIT ADD Robert Ayers	1118 LAKE TERR 213	BOYNTON BCH, FL 00000
P/D	TOTH, MARY	1118 LAKE TERR 201	BOYNTON BCH, FL 00000
D	HOWELL, ANNA	1118 LAKE TERR 111	BOYNTON BCH, FL 00000
S/D	DUFFY, RUTH	1118 LAKE TERR 202	BOYNTON BCH, FL 00000

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent:
GROMKO, DONALD J.
306 NE 2ND AVENUE
BOYNTON BEACH, FL. 33435

8. Name and Address of New Registered Agent:
81 Name:
82 Street Address (Do NOT Use P.O. Box Numbers):
413 Southeast 4th Street
83 City and State (Do NOT Use Post Office Box Numbers):
84 City: **Boynton Beach, FL.** 85 Zip: **33435**

9. I am the registered agent of Sections 607.020 and 607.1500 of Sections 607.020 and 607.1500 for all purposes. I am not a resident of this state and I am not a resident of the state in which this corporation is organized. I am not a resident of the state in which this corporation is organized and I am not a resident of the state in which this corporation is organized.

(Registered Agent Accepting Appointment)
10. I am a resident of this state and I am qualified to do business in this state. Yes No (See after scan for explanation on this page)

11. I am the officer or director of this corporation and I am qualified to do business in this state. I am not a resident of this state and I am not a resident of the state in which this corporation is organized. I am not a resident of the state in which this corporation is organized.

SIGNATURE: *Mary E Toth*
Mary Toth
President/Director

File Now. Filing Fee after May 1 is \$225.00

CORPORATION
ANNUAL REPORT
1993



FLORIDA DEPARTMENT OF STATE
2015 State
Secretary of State
DIVISION OF CORPORATIONS

RECEIVED

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TAMARAC, FLA.
FRED

1. Name and Mailing Address of Corporation **DOCUMENT # 719229 (7)**
LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION, INC.
1118 LAKE TERR
BOYNTON BEACH FL 33426-4213

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/01/1970	3a. Date of Last Report 03/27/1992
4. FEI Number 591446292	Applied For Real Property
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Application Fee (to be paid)
6. Foreign Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Filing
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$138.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 1931 Liability Status: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

1. Name and Mailing Address of Corporation (continued from Box 2)

FILING FEE
\$200.00
ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

2. Mailing Address	2a. Principle Place of Business
21. State Apt. #, etc.	26. State Apt. #, etc.
22. City, State	27. City & State
23. Country	28. Country
24. Zip	29. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent

GROMKO, DONALD J.
413 SE 4TH ST
BOYNTON BEACH FL 33435

10. Name and Address of New Registered Agent

81. Name GROMKO + PORTER, INC.		
82. Street Address, P.O. Box Number or Post Authorization 306 E. BOYNTON BCH. BLVD.		
83. City		
84. City BOYNTON BEACH FL	85. Zip Code 33435	86. Country P.B.

11. I, the undersigned, as president, secretary, or other officer or authorized agent, of the above named corporation, certify that this statement is true and correct to the best of my knowledge and belief, and I am a resident of, and accept the obligations of, Section 1931 Florida Statutes.

John Porter DATE **2-18-93**

12. OFFICERS AND DIRECTORS

V/D ARMSTRONG, JAMES 1118 LAKE TERR 216 BOYNTON BCH, FL 00000
T/D AYERS, ROBERT 1118 LAKE TERR 213 BOYNTON BCH, FL 00000
P/D TOTH, MARY 1118 LAKE TERR 201 BOYNTON BCH, FL 00000
D HONELL, ANNA 1118 LAKE TERR 111 BOYNTON BCH, FL 00000
S/D DUFFY, RUTH 1118 LAKE TERR 202 BOYNTON BCH, FL 00000

13. OFFICERS AND DIRECTORS CHANGES

17. NAME	
18. NAME	
19. NAME	
20. NAME	
21. NAME	
22. NAME WAYNE RIDENGER	1118 LAKE TERR 109 BOYNTON BCH, FL 33426
23. NAME	
24. NAME	
25. NAME	
26. NAME	
27. NAME	
28. NAME	
29. NAME	
30. NAME	

SIGNATURE X *Ruth Duffy* SECRETARY DATE **2-18-93**

(407) 737-8017

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

FILED

APR 23 AM 9:08

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1994**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Corporation Name
LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION INC.

DOCUMENT #
718229 (7)

Mailing Address
**1118 LAKE TERRACE
BOYNTON BEACH FL 33428**

Principal Place of Business
**1118 LAKE TERRACE
BOYNTON BEACH FL 33428**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/01/1970** 3a. Date of Last Report: **02/23/1993**

4. FEI Number: **59-1446292** Applied For: Not Applicable:

5. Certificate of Status Dues: **\$8.75** 6. Election Campaign Financing Trust Fund Contribution:

7. Nonprofit Exempt from \$138.75 Supplemental Fee: **\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**GROMO & PORTER INC.
306 E BOYNTON BCH BLVD
BOYNTON BEACH FL 33435**

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Accepted)
03
04 City FL 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or 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 is 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 607.0505 or 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **3/4/94**

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS	
12.01 TITLE	N/D	13.01 TITLE	PRESIDENT
12.02 NAME	ARMSTRONG, JAMES	13.02 NAME	
12.03 STREET ADDRESS	1118 LAKE TERR 216	13.03 STREET ADDRESS	
12.04 CITY - ST - ZIP	BOYNTON BCH, FL 00000	13.04 CITY - ST - ZIP	
12.01 TITLE	T/D	13.01 TITLE	RIDINGER
12.02 NAME	RIDINGER WAYNE	13.02 NAME	
12.03 STREET ADDRESS	1118 LAKE TERRACE 109	13.03 STREET ADDRESS	
12.04 CITY - ST - ZIP	BOYNTON BCH, FL 00000	13.04 CITY - ST - ZIP	
12.01 TITLE	P/D	13.01 TITLE	V. PRESIDENT
12.02 NAME	TOTH, MARY	13.02 NAME	
12.03 STREET ADDRESS	1118 LAKE TERR 201	13.03 STREET ADDRESS	
12.04 CITY - ST - ZIP	BOYNTON BCH, FL 00000	13.04 CITY - ST - ZIP	
12.01 TITLE	D	13.01 TITLE	
12.02 NAME	HOWELL, ANNA	13.02 NAME	
12.03 STREET ADDRESS	1118 LAKE TERR 111	13.03 STREET ADDRESS	
12.04 CITY - ST - ZIP	BOYNTON BCH, FL 00000	13.04 CITY - ST - ZIP	
12.01 TITLE	S/D	13.01 TITLE	
12.02 NAME	DUFFY, RUTH	13.02 NAME	
12.03 STREET ADDRESS	1118 LAKE TERR 202	13.03 STREET ADDRESS	
12.04 CITY - ST - ZIP	BOYNTON BCH, FL 00000	13.04 CITY - ST - ZIP	
12.01 TITLE		13.01 TITLE	
12.02 NAME		13.02 NAME	
12.03 STREET ADDRESS		13.03 STREET ADDRESS	
12.04 CITY - ST - ZIP		13.04 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.073(4), Florida Statutes, relating to the disclosure of information from any liability of non-compliance with Section 119.073(4) in the event that the information supplied is deemed exempt from public records. I affirm that the information furnished is true and correct to the best of my knowledge and belief, and that the information is not false or misleading. I understand that the Secretary of State is authorized to investigate the information furnished and to take any action that may be necessary to enforce the provisions of the Florida Statutes. I understand that the Secretary of State is authorized to take any action that may be necessary to enforce the provisions of the Florida Statutes. I understand that the Secretary of State is authorized to take any action that may be necessary to enforce the provisions of the Florida Statutes.

SIGNATURE: *Ruth Y. Duffy* Secretary 3/22/94 734.6169

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00



1995

DIVISION OF CORPORATIONS

95 FEB 22 PM 12:30

DOCUMENT # 719229 (7)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LEISUREVILLE LAKE UNIT H CONDOMINIUM ASSOCIATION
. INC.

DO NOT WRITE IN THIS SPACE

1118 LAKE TERRACE
BOYNTON BEACH FL 33426

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BOYNTON BEACH FL 33426

2. Date Incorporated or Qualified 09/01/1970	3a. Date of Last Report 03/29/1994
4. FEI Number 59-1446292	Assault F. Not App.
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust and Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 194(3) Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. Mailing Address	26
22. State, Apt. #, etc.	27
23. City & State	28
24. County	29
25. Zip	30

GROMO & PORTER, INC.
306 E BOYNTON BCH BLVD
BOYNTON BEACH FL 33435

81. Name	
82. Street Address (P.O. Box Number is Not Accepted)	
83.	
84. City	
85. Zip Code	FL

I, the undersigned, being duly qualified, do hereby certify that the above-named corporation submits this statement for the purpose of changing its registration, and that the same is true and correct to the best of my knowledge and belief. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent for the corporation under the provisions of Section 607.0506, Florida Statutes.

OFFICERS AND DIRECTORS	13.	ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS BY:
P ARMSTRONG, JAMES 1118 LAKE TERR 218 BOYNTON BCH, FL 00000	11 NAME 12 HOME 13 STREET ADDRESS 14 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add 3000001412370 -02/23/95--01012--009 ***130.000 ***130.000
TD HIDINGER, WAYNE 1118 LAKE TERRACE 109 BOYNTON BCH, FL 00000	11 NAME 12 HOME 13 STREET ADDRESS 14 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
VP TOTH, MARY 1118 LAKE TERR 201 BOYNTON BCH, FL 00000	11 NAME 12 HOME 13 STREET ADDRESS 14 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
D HOWELL, ANNA 1118 LAKE TERR 111 BOYNTON BCH, FL 00000	11 NAME 12 HOME 13 STREET ADDRESS 14 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
SD DUFFY, RUTH 1118 LAKE TERR 202 BOYNTON BCH, FL 00000	11 NAME 12 HOME 13 STREET ADDRESS 14 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add

SIGNATURE:

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