## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 722501** 

FILED Apr 23, 2009 Secretary of State

Entity Name: LEONARDO ARMS BEACH CLUB CONDOMINIUM ASSOCIATION UNIT III, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
7400 ESTE FORT MYE	RO BLVD. RS BEACH, FL	_ 33931				
Current Mailing Address:			New Mailii	New Mailing Address:		
7400 ESTE FORT MYE	RO BLVD. RS BEACH, FL	_ 33931				
FEI Number:	59-1450276	FEI Number Applied For ( )	FEI Number Not Appli	licable ( ) Certificate of Status Desired ( )		
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:		
	DOUGLAS BREGOR BLVD BRS, FL 33919	). #3 US	13101 MCC	NASSOCIATES, INC. GREGOR BLVD. #3 ERS, FL 33919 US		
The above in the State		ubmits this statement for the pur	rpose of changing it	ts registered office or registered agent, or both,		
SIGNATUR	E: ACHERON	I ASSOCIATES		04/23/2009		
	Electronic	Signature of Registered Agent	t	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DP ()EDITONTO, JOSEI 7400 ESTERO B	LVD #218	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	DVP ()E PRESTA, LOUIS 7400 ESTERO B FORT MYERS BI		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	DST ()E CARROLL, ALICI 7400 ESTERO B FORT MYERS BI	LVD. #217	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	DS () E CARROLL, ALICI 7400 ESTERO B FORT MYERS BI	LVD. #217	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D ()E MILLER, JOYCE 7400 ESTERO B FORT MYERS BI		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition STEINWEBER, TONY 7400 ESTERO BLVD. #319 FORT MYERS BEACH, FL 33931		

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: JOSEPH DITONTO PD 04/23/2009