2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#727173

Secretary of State Entity Name: LEISURE VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

8901 BERKLEY CT

NORTH PORT, FL 342872123 US

Current Mailing Address:

New Mailing Address:

8901 BERKLEY CT

8901 BERKLEY CT

P.O. BOX 7334

NORTH PORT, FL 342872123 US

NORTH PORT, FL 342872123 US

FEI Number: 59-1550188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

US

Name and Address of New Registered Agent:

MARLON, NADA 8551 PICKWICK RD

NORTH PORT, FL 34287

MARLON, NADA P 8551 PICKWICK RD

NORTH PORT, FL 34287 US

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: NADA MARLON

02/26/2009

Electronic Signature of Registered Agent

Date

FILED Feb 26, 2009

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete BROWN, WILLIAM T Name: 8790 PICKWICK RD Address: City-St-Zip: NORTH PORT, FL 34287

Title: () Delete SARAN, SAM Name: Address: 8850 PICKWICK RD City-St-Zip: NORTH PORT, FL 34287

Title: () Delete WEDDING, ELLEN Name: 8901 BURKLEY CT Address: City-St-Zip: NORTH PORT, FL 34287

Title: () Delete Name: FERBER, JOE 8541 REGENCY CT Address: City-St-Zip: NORTH PORT, FL 34287

Title: () Delete TOMSKI, DENNIS Name: 8731 PICK WICK RD Address: City-St-Zip: NORTH PORT, FL 34287

Title: () Delete CROOK, HOWARD A Name: Address: 8610 PICK WICK RD NORTH PORT, FL 34287 City-St-Zip:

(X) Change () Addition

BROWN, WILLIAM T D Name: Address: 8790 PICKWICK RD City-St-Zip: NORTH PORT, FL 34287

Title: (X) Change () Addition

EASTBURN, SUSAN VP Name: Address: 8640 PICKWICK RD City-St-Zip: NORTH PORT, FL 34287

Title: (X) Change () Addition

WEDDING, ELLEN T Name: 8901 BERKLEY CT Address: City-St-Zip: NORTH PORT, FL 34287

Title: (X) Change () Addition

Name: FERBER, JOE D Address: 8541 REGENCY CT City-St-Zip: NORTH PORT, FL 34287

Title: (X) Change () Addition

MILLER, MARLENE D Name: 8580 PICK WICK RD Address: City-St-Zip: NORTH PORT, FL 34287

Title: (X) Change () Addition

CROOK, HOWARD A D Name: Address: 8610 PICK WICK RD NORTH PORT, FL 34287 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: ELLEN WEDDING Т 02/26/2009