

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90029 024 ****61.25

DOCUMENT # 731561

1. Entity Name

**PALM BEACH LEISUREVILLE SUMMERS LAKE
APARTMENTS BUILDING NO. 6 CONDOMINIUM**



Principal Place of Business

**721 SW LAKE CT
APT. 106 - BLDG 6
BOYNTON BEACH FL 33426
US**

Mailing Address

**721 SW LAKE CT
APT. 106 - BLDG 6
BOYNTON BEACH FL 33426
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-1799807

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**O'KEEFFE, JAMES
721 SW LAKE CT
APT 104 BLDG 6
BOYNTON BCH FL 33426**

Name **O'Keeffe James**

Street Address (P.O. Box Number is Not Acceptable)

721 SW Lake Ct

Apt 106 Bldg 6

City **Boynton Beach**

FL

Zip Code

33426

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **O'KEEFFE, JAMES**
STREET ADDRESS **721 SW LAKE CT #106**
CITY-ST-ZIP **BOYNTON BEACH FL 33426**

TITLE ☐ Delete
NAME **BOGERT, JAMES**
STREET ADDRESS **721 SW LAKE CT. #104**
CITY-ST-ZIP **BOYNTON BEACH FL 33426**

TITLE ☒ Delete
NAME **CARLSON, SUSAN**
STREET ADDRESS **721 SW LAKE CT. #103**
CITY-ST-ZIP **BOYNTON BEACH FL 33426**

TITLE ☐ Delete
NAME **O'KEEFFE, ELIZABETH**
STREET ADDRESS **721 SW LAKE CT #106**
CITY-ST-ZIP **BOYNTON BEACH FL 33426**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **Betty Barbera**
STREET ADDRESS **721 SW Lake Ct #105**
CITY-ST-ZIP **Boynton Beach FL 33426**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James T O'Keeffe

JAMES T O'KEEFFE

Date

Daytime Phone #

**Feb 2-9-04
73224055**