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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 738740

1. Corporation Name

LEISUREVILLE SQUARE CLUB, INC.

Principal Place of Business
1901 SOUTH CONGRESS AVENUE
120
BOYNTON FL 33426
US

Mailing Address
1901 SOUTH CONGRESS AVENUE
120
BOYNTON FL 33426
US

138381-90194-49 *



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/19/1977	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 23-7410600	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country		

9. Name and Address of Current Registered Agent

MERKLE, WILLIAM R.
1901 SOUTH CONGRESS AVENUE
#120
BOYNTON FL 33426

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of 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 was 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P
NAME	QUINNETTE, WILLIAM	1.2 NAME	RICHARD BOYD
STREET ADDRESS	1839 SW 17TH ST	1.3 STREET ADDRESS	2083 S.W. 13th AVE
CITY-ST-ZIP	BOYNTON BEACH FL 33426	1.4 CITY-ST-ZIP	BOYNTON BEACH FL 33426
TITLE	R	2.1 TITLE	T
NAME	ROBERTS, GEORGE	2.2 NAME	WARREN MORCH
STREET ADDRESS	7717 BRISTOL BAY LN	2.3 STREET ADDRESS	708 S.W. 16th STREET
CITY-ST-ZIP	LAKE WORTH FL	2.4 CITY-ST-ZIP	BOYNTON BEACH FL 33426
TITLE	D	3.1 TITLE	D
NAME	LOGAN, CHARLES	3.2 NAME	IRVING ZASLOW
STREET ADDRESS	525 SW 16TH ST	3.3 STREET ADDRESS	2102 LANDINGS BLVD.
CITY-ST-ZIP	BOYNTON BCH, FL 00000 33426	3.4 CITY-ST-ZIP	W.P.B. 33413
TITLE	SD	4.1 TITLE	
NAME	BROWN, GEORGE B	4.2 NAME	
STREET ADDRESS	1115 SW 22ND AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL 33445	4.4 CITY-ST-ZIP	
TITLE	TD	5.1 TITLE	VP
NAME	FERNALD, LLEWELLYN K	5.2 NAME	CLARANCE DEWAELE
STREET ADDRESS	2792 DONNELLY DR APT 132	5.3 STREET ADDRESS	105 S.W. 9th STREET
CITY-ST-ZIP	LANTANA FL 33465	5.4 CITY-ST-ZIP	BOYNTON BEACH, FL 33426
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED *Wanda Mon* 2/5/99 561 734-3610

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)