2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2008 8:00 am
Secretary of State
02-27-2008 90010 046 ****61.25

DOCUMENT # 743691

1. Entity Name
LEISURE VILLAS EAST PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
8231 RANDWICK KCT NORTH PORT, FL 34287	8231 RANDWICK KCT NORTH PORT, FL 34287

01172008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2104721 ☐ 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
MORRIS, STEPHEN S 8431 BOULTON CT NORTH PORT, FL 34287	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FRAME, RALPH 8370 PICKWICK RD NORTH PORT, FL 34287	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D FRAME, RALPH 8370 PICKWICK RD NORTH PORT, FL 34287	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MORRIS, STEPHEN 8431 BOULTON CT NORTH PORT, FL 34287	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D MORRIS, STEPHEN 8431 BOULTON CT NORTH PORT, FL 34287	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ECKENRODE, WALTER 8441 BOULTON CT NORTH PORT, FL 34287	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ECKENRODE, WALTER 8441 BOULTON CT NORTH PORT, FL 34287	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARDASH, AL 8250 PICKWICK RD. NORTH PORT, FL 34287	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP/D BARDASH, AL 8250 PICKWICK RD NORTH PORT, FL 34287	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARDASH, AL 8250 PICKWICK RF NORTH PORT, FL 34287	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D CVENGROS, ANGIE 8130 PICKWICK RD NORTH PORT, FL 34287	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, NORVAL 8081 MEADE CT NORTH PORT, FL 34287	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Stephen S. Morris STEPHEN S. MORRIS 2/25/08 941-426-3085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
40033630
#743691

LEISURE VILLAS EAST
Property Owners' Association
8231 Randwick Court, North Port, FL 34287

(A Deed Restricted 55+ Community Certified as Housing for Older Persons)

11. ADDITION

D
BISSETTE, RICHARD
8331 PICKWICK RD
NORTH PORT, FL 34287

Stephen S Morris

STEPHEN S. MORRIS

2/25/08

941-426-3085