## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90105 050 \*\*\*150.00

**FILED** 

## **DOCUMENT # 841997**

1. Corporation Name

LEISURE RESORTS, INC.

Principal Place of Business	Mailing Address			<b>310</b> 11 51611 61511 1051
CHASE ENTERPRISES (ATTN:JOSEPH KORZENIK)  E COMMERCIAL PLAZA RTFORD CT 06103  "CHASE ENTERPRISES (ATTN:JOSEPH KORZENIK) ONE COMMERCIAL PLAZA HARTFORD CT 06103 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed	<u>:</u>	
			12/07/1978	Table 5
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable
<u> </u>	26		06-0992312	75 Additional
Suite, Apt. #, etc.	Suite, Apt. #, etc.		) E. Contitento of Statue Decised.	ee Required
City & State	City & State		1	.00 May Be Ided to Fees
Zip Country	Zip 30	Country	8. This corporation owes the current year Intangible Personal Property Tax.	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
ST. LOUIS, ROALND R JR ST. LOUIS, GUERRA & AUSLANDER, P.A. 201 S. BISCAYNE BLVD. MIAMI CNT., 10TH FL. MIAMI FL 33131-4325		81 Name	NRAI SERVICES, INC.  ress (P.O. Box Number is Not Acceptable)  526 E. Park Avenue  Tallahassee, FL 85	7in Code
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent, 1 am familiar with, and accept the miligations.	of Florida. Such change was auth	ionzed by the corporati	poration submits this statement for the purpose of changing on's board of directors. I hereby accept the appointment	ng its registered as registered
SIGNATURE Signature, typed of printed name of registered agent	and title if applicable. (NOTE: Re	gistered Agent signature require	ad when reinstating) DATE	777_
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRI	
TITLE S	☐ DELETE	1.1 TITLE	□ Ch	ange
NAME KORZENIK, JOSEPH		1.2 NAME		
STREET ADDRESS ONE COMMERCIAL PLAZA		1.3 STREET ADDRESS		
HARTEORD CT	1	14 CITY-ST-ZIP		

CITY-ST-ZIP ☐ Change Addition DELETE 2.1 TITLE TITLE CHASE, DAVID T. 2.2 NAME NAME ONE COMMERCIAL PLAZA 2.3 STREET ADDRESS STREET ADDRESS HARTFORD CT 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 3.1 TDLE TITLE REMIREZ, RICHARD J. F. 3.2 NAME NAME 400-A North Flagler Drive ONE CORPORATE PLAZA 3.3 STREET ADDRESS STREET ADDRESS West Palm Beach, FL FT. LAUDERDALE FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 4.1 TITLE EVD TITLE CHASE, CHERYL A 4. 2 NAME NAME ONE COMMERCIAL PLAZA 4.3 STREET ADDRESS STREET ADDRESS HARTFORD CT 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE EVD 5.2 NAME CHASE, ARNOLD L. NAME 5.3 STREET ADDRESS ONE COMMERCIAL PLAZA STREET ADDRESS 5.4 CITY-ST-ZIP HARTFORD CT CITY-ST-ZIP Change Addition ☐ DELETE 6.1 TITLE TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY+ST-ZIP

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 607, 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:

FIGNATURE RChery IRE Chase - Exec. V/P.

4/6/99 860/549-1674

Daytime Phone #

30 100 1::

**100** 

CR2E034 (11/98)