## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 841997** 

Title:

Name:

Address:

City-St-Zip:

FILED Apr 21, 2008 Secretary of State

Entity Name: LEISURE RESORTS, INC.						
Current Principal Place of Business:				New Principal Place of Business:		
225 ASYLU	ENTERPRISI IM ST, 29TH D, CT 06103	FLR				
Current Mailing Address:				New Mailing Address:		
225 ASYLU	ENTERPRISI IM ST, 29TH D, CT 06103	FLR				
FEI Number:	Number: 06-0992312 FEI Number Applied For ( ) FEI		FEI Num	ber Not Appli	cable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
STE 4	/ICES, INC. CUTIVE PARK FL 33331 U					
The above in the State		submits this statement for the pu	urpose of	changing it	s registere	ed office or registered agent, or both,
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Cam	paign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PT ( REMIREZ, RIC 400-A N. FLAG WEST PALM E	LER DR.		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	CHASE, CHER	UARE, 225 ASYLUM ST, 29TH FLR		Title: Name: Address: City-St-Zip:		(X) Change()Addition HERYL A SQUARE, 225 ASYLUM ST, 29TH FLR D, CT 061031538
Title: Name: Address: City-St-Zip:	CHASE, ARNO	UARE, 225 ASYLUM ST, 29TH FLR		Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition RNOLD L SQUARE, 225 ASYLUM ST, 29TH FLR D, CT 061031538

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CHERYL A. CHASE **EVP** 04/21/2008

( ) Delete

HARTFORD, CT 061031538

GOODWIN SQUARE, 225 ASYLUM ST, 29TH FLR

PORCO, ERNEST A

() Change () Addition