

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 841997

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: LEISURE RESORTS, INC.

**Current Principal Place of Business:**

% CHASE ENTERPRISES  
225 ASYLUM ST, 29TH FLR  
HARTFORD, CT 061031538 US

**New Principal Place of Business:**

**Current Mailing Address:**

% CHASE ENTERPRISES  
225 ASYLUM ST, 29TH FLR  
HARTFORD, CT 061031538 US

**New Mailing Address:**

FEI Number: 06-0992312      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR  
STE 4  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: REMIREZ, RICHARD J., F.  
Address: 400-A N. FLAGLER DR.  
City-St-Zip: WEST PALM BEACH, FL

Title: EVDS ( ) Delete  
Name: CHASE, CHERYL A  
Address: GOODWIN SQUARE, 225 ASYLUM ST, 29TH FLR  
City-St-Zip: HARTFORD, CT 061031538

Title: EVD ( ) Delete  
Name: CHASE, ARNOLD L  
Address: GOODWIN SQUARE, 225 ASYLUM ST, 29TH FLR  
City-St-Zip: HARTFORD, CT 061031538

Title: VP ( ) Delete  
Name: PORCO, ERNEST A  
Address: GOODWIN SQUARE, 225 ASYLUM ST, 29TH FLR  
City-St-Zip: HARTFORD, CT 061031538

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: CHERYL A. CHASE

EVP

04/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date