

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002702

FILED  
Jan 19, 2011  
Secretary of State

**Entity Name:** LEISURE MANAGEMENT SERVICES AMERICA, INC.

**Current Principal Place of Business:**

1835 EAST HALLANDALE BEACH BLVD  
#317  
HALLANDALE, FL 33009 US

**New Principal Place of Business:**

**Current Mailing Address:**

1835 EAST HALLANDALE BEACH BLVD  
#317  
HALLANDALE, FL 33009 US

**New Mailing Address:**

**FEI Number:** 33-1139574

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: HARTLEY, DONALD  
Address: 65 VIDA ST,  
City-St-Zip: ALBEFELDIE, AU VIC3040

Title: D  
Name: CICARELLI, NICK  
Address: 46 KING ST,  
City-St-Zip: ESSENDON, AU VIC3040

Title: P  
Name: UDEN, NEIL  
Address: 1835 EAST HALLANDALE BEACH BLVD,  
City-St-Zip: HALLANDALE, FL 33009

I hereby 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 all other like empowered.

SIGNATURE: NEIL UDEN

P

01/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date