

FLORIDA DEPARTMENT OF STATE

DOCUMENT # F9600001063 1. Corporation Name

LEISURE FACILITIES INC XV

| Principal Place of Business | | | | |
|-----------------------------|------------------------|--|--|--|
| 2650 | N MILITARY TRAIL, #350 | | | |

BOCA RATON FL 33431

TITLE

NAME

TITLE NAME

STREET ADDRESS

CITY-\$T-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

STREET ADDRESS

Mailing Address

2650 N MILITARY TRAIL. #350 **BOCA RATON FL 33431**

| 2. | Principal Place of Busines | s | 2a. | Mailing Address | |
|----|----------------------------|-------------------|-------------|---------------------|---------|
| 21 | | | 26 | | |
| | Suite, Apt. #, etc. | | 1 | Suite, Apl. #, etc. | |
| 22 | | | [27] | | |
| | City & State | | | City & State | |
| 23 | | | 28 | | |
| | Zip | Country | | Zφ | Country |
| 24 | 25 | | 29 | 30 |) |
| | 9. Name ar | nd Address of Cur | rent Regist | tered Agent | |
| ľ | | | | | 0.4 |

NATIONAL CORPORATE RESEARCH, LTD., INC.

1406 HAYS ST., #2 TALLAHASSEE FL 32301

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED 99 APR 30 PH 4: 19



DO NOT WRITE IN THIS SPACE

| 3. | Date | Incorporated | or | Qualifed |
|----|------|--------------|----|----------|
| ₩. | | | | |

03/01/1996

4. FEL Number

65-0601718

Not Applicable \$8.75 Additional

Applied For

- 5. Certificate of Status Desired
- Fee Required \$5.00 May Be Added to Fees
- 6. Election Campaign Financing Trust Fund Contribution B. This corporation owes the current year Intangible
 - [] Yes
- Personal Property Tax 10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the agent. I am familiar with, and accept the nch change was authorized by the corporation's board of directors. Thereby accept the appointment as registered from 60* .0505, Florida Statutes

81 Name

82

83 84

2.3 STREET ADORES:

2 4 CITY-\$1-ZIP

34 CiTY-51-ZiF

43 STREET ADDRES

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CiTY-S1-2IC

4.4 CITY-51-ZIP

LI TITLE

4 2 NANE

SIT TITLE 5.2 NAME

6 1 THILE

67 NAME

3.11111.

| SIGNATURE | Signature, typed or printed re | anie of Ca | polici di | | | Papplic |
|-----------|--------------------------------|------------|-----------|-----|------|---------|
| 12. | | OFFIC | ERS | AND | DIRE | C10F |

PDC

LUCIANI, JOHN

13. [] DELETE 1.2 NAME 2650 N. MILITARY TRAIL, #350 **BOCA RATON FL 33431** [] DELETE RODIN, BERNARD M

DELFTE

2650 N. MILITARY TRAIL, #350 STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP TITLE NAME

STREET ADDRESS CRY-ST-ZIP DELETE TITLE NAME STREET ADDRESS

[] DELETE STREET ADORESS CITY-ST-ZIP [] DELETE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[| Change [| Addition 900002870349--05/11/99--01004--011 ***1650**.0**0

****150.00 [| Change [| Addition

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[] Addition

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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 logal 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:

4/28/99 201 9477522

CR2E034 (11/98)