

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 91177 003 ***550.00

DOCUMENT # F96000001063

1. Entity Name

LEISURE FACILITIES INC XV

Principal Place of Business

2650 N MILITARY TRAIL #350
 BOCA RATON FL 33431

Mailing Address

2650 N MILITARY TRAIL #350
 BOCA RATON FL 33431

2. Principal Place of Business

100 Jericho Quadrangle

3. Mailing Address

100 Jericho Quadrangle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

214

214

City & State

Jericho, NY

City & State

Jericho, NY

Zip

11753

Country

USA

Zip

11753

Country

USA

6. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.
 1406 HAYS ST., #2
 TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name
 Corporation Service Company
 Street Address (P.O. Box Number is Not Acceptable)
 1201 Hays Street

City
 Tallahassee

FL

Zip Code
 32301

8. 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

Judith Morgan, Asst. V.P.

05/17/2001

Signature, typed or printed name of registered agent and title if applicable

(NOT Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW !! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDC LUCIANI, JOHN 2650 N. MILITARY TRAIL, #350 BOCA RATON FL 33431	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT MERLINO, CATHERINE ONE EXECUTIVE DRIVE FORT LEE NJ 07024	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS CUBBISON, DAWN 2650 N. MILITARY TRAIL BOCA RATON FL 33431	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MALOWE, KEITH ONE EXECUTIVE DRIVE FORT LEE NJ 07024	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO/P/D Michael Ashner 100 Jericho Quadrangle, Suite 214 Jericho, NY 11753	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPI Asst. Sec'y Peter Braverman 100 Jericho Quadrangle, Suite 214 Jericho, NY 11753	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO/EVP/Sec'y Carolyn Tiffany 100 Jericho Quadrangle, Suite 214 Jericho, NY 11753	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO/Treasurer Tom Staples 100 Jericho Quadrangle, Suite 214 Jericho, NY 11753	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Sec'y Allison Forrester 100 Jericho Quadrangle, Suite 214 Jericho, NY 11753	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental report is true and accurate and that I am an officer or director of the corporation or the registered agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)