

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90132 035 ****61.25

DOCUMENT # N03401

1. Entity Name

LEISURE LAKES PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business

**3965 LEISURE LK DR
CHIPLEY FL 32428
US**

Mailing Address

**3965 LEISURE LAKE DR
CHIPLEY FL 32428
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2658898**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CHURCHWELL, JANET
4152 LEISURE LAKES DRIVE
CHIPLEY FL 32428**

7. Name and Address of New Registered Agent

Name

Margaret F. Riley

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

1754 Pioneer Road

City

Chipley

FL

Zip Code

32428

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Margaret F. Riley**

Bookkeeper

1/17/2003

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **WISE, GUS JR**
STREET ADDRESS **4209 LEISURE LAKES DRIVE**
CITY-ST-ZIP **CHIPLEY FL 32428**

TITLE **VP** ☐ Delete
NAME **GAINER, GEORGE B**
STREET ADDRESS **720 W BEACH DRIVE**
CITY-ST-ZIP **PANAMA CITY FL 32401**

TITLE **D** ☒ Delete
NAME **JOHNSON, JOHN D**
STREET ADDRESS **801 DOGWOOD LANE**
CITY-ST-ZIP **CHIPLEY FL 32428**

TITLE **D** ☐ Delete
NAME **HADDOCK, C C**
STREET ADDRESS **2734 BONNETT POND ROAD**
CITY-ST-ZIP **CHIPLEY FL 32428**

TITLE **D** ☐ Delete
NAME **HARRISON, STANLEY G**
STREET ADDRESS **3355 PREAKNESS PLACE**
CITY-ST-ZIP **CHIPLEY FL 32428**

TITLE **SD** ☐ Delete
NAME **SUNDHOLM, IVAH**
STREET ADDRESS **3481 QUAIL RIDGE**
CITY-ST-ZIP **CHIPLEY FL 32428**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Director** ☒ Change ☐ Addition
NAME **Gainer George B**
STREET ADDRESS **720 W. Beach Drive**
CITY-ST-ZIP **Panama City FL 32401**

TITLE **Director** ☐ Change ☒ Addition
NAME **Scott Tommy**
STREET ADDRESS **4233 Leisure Lakes Drive**
CITY-ST-ZIP **Chipley FL 32428**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Vice-President** ☒ Change ☐ Addition
NAME **Harrison Stanley G.**
STREET ADDRESS **3355 Preakness Place**
CITY-ST-ZIP **Chipley FL 32428**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE **SIGNATURE REQUIRED**

1-17-2003 (850) 747-4427

CR2E037 (10/02)