

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009001

FILED  
Jan 30, 2009  
Secretary of State

**Entity Name:** LESLIE'S HIDEAWAY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2955 HARTLEY ROAD SUITE 108  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

2955 HARTLEY ROAD  
SUITE 108  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

2955 HANTLEY RD STE 108  
JACKSONVILLE, FL 32257

**New Mailing Address:**

2955 HARTLEY ROAD  
SUITE 108  
JACKSONVILLE, FL 32257

**FEI Number:** 55-0910592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATOVINA, GREGORY E  
2955 HARTLEY ROAD SUITE 108  
JACKSONVILLE, FL 32257 US

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

MATOVINA, GREGORY E  
2955 HARTLEY ROAD  
SUITE 108  
JACKSONVILLE, FL 32257 US

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: \_\_\_\_\_

01/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: MATOVINA, GREGORY E  
Address: 2955 HARTLEY ROAD SUITE 108  
City-St-Zip: JACKSONVILLE, FL 32257

Title: DVT ( ) Delete  
Name: BORSTEIN, DONALD K  
Address: 2955 HARTLEY ROAD SUITE 108  
City-St-Zip: JACKSONVILLE, FL 32257

Title: DS ( ) Delete  
Name: HUDSON, SHARON  
Address: 2955 HARTLEY ROAD SUITE 108  
City-St-Zip: JACKSONVILLE, FL 32257

**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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY E. MATOVINA

DP

01/30/2009

Electronic Signature of Signing Officer or Director

Date