

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# S87484

**FILED**  
**Feb 04, 2011**  
**Secretary of State**

**Entity Name:** LEISURE RIVER ESTATES, INC.

**Current Principal Place of Business:**

11401 HWY 301 N.  
THONOTOSASSA, FL 33592 US

**New Principal Place of Business:**

**Current Mailing Address:**

BOX 16800  
TAMPA, FL 33687

**New Mailing Address:**

**FEI Number:** 59-3094454

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BENEVIDES, LOUIS  
665 MOON RANCH RD  
SEBRING, FL 33870 US

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

KENNARD, PAULA  
1853 CARROLL DRIVE  
SAINT CLOUD, FL 34771 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: PAULA D. KENNARD

02/04/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: BLACK, GEORGE L., JR  
Address: PO BOX 16800  
City-St-Zip: TAMPA, FL 33687

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: GEORGE L. BLACK, JR.

PRES

02/04/2011

Electronic Signature of Signing Officer or Director

Date