2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 635573

Entity Name: LEADERSHIP CENTERS, U.S.A., INC.

FILED Feb 10, 2006 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
8286 BAYI JAX, FL 3	BERRY RD 2256 US			
Current Mailing Address:			New Mailing Address:	
8286 BAYI JAX, FL 3	BERRY RD 2256 US			
FEI Number	: 59-1978264	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New				of New Registered Agent:
8286 BAYI	HARLES R. BERRY RD WILLE, FL 322	56 US		
	named entity se of Florida.	submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,
SIGNATUI	RE:			
		ic Signature of Registered Age	nt	Date
Election Ca	mpaign Financing	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VPAD () MERCADO, ELI 10330 MEADOV JACKSONVILLE	V POINT DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	CD () SCOTT, CHARL 7185 FAIRWAY LA JOLLA, CA	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PD () WEBSTER, CH/ 2424 BUCKNEL VALRICO, FL 3	L DR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	HOSCH, CHÈST	BG127 PEACHTREE ST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () SCOTT, KATHE 7185 FAIRWAY LA JOLLA, CA	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELISE G MERCADO VPAD 02/10/2006