2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742504

FILED Jan 09, 2008 Secretary of State

Entity Name: LA LECHE LEAGUE OF FLORIDA, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 3898 RUNNMEDE RD 3898 RUNNYMEDE RD US TALLAHASSEE, FL 32309 US TALLAHASSEE, FL 32309 **Current Mailing Address: New Mailing Address:** 3898 RUNNMEDE RD 3898 RUNNYMEDE RD TALLAHASSEE, FL 32309 US TALLAHASSEE, FL 32309 US FEI Number: 59-1817194 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STANFORD, ROBIN 3898 RUNNÝMEDE RD TALLAHASSEE, FL 32309 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition PELOSO, JEAN PELOSO, JOAN Name: Name: 4732 NW 6TH CT Address: 4732 NW 6TH CT Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: PLANTATION, FL 33317 Title: () Delete Title: () Change () Addition STANFORD, ROBIN Name: Name: Address: 3898 RUNNYMEDE RD Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: Title: () Delete Title: () Change () Addition ZISKA, ELAINE Name: Name: 9234 BRINDELWOOD DR Address: Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BERNING, CHRIS Name: 3316 STAGECOACH TRAIL Address: Address: City-St-Zip: WIMAUMA, FL 33598 City-St-Zip: Title: () Delete Title: (X) Change () Addition BONYATA, KELLY GIBEL, JUDITH Name: Name: 147 31ST AVENUE NORTH 4475 N. JEFFERSON AVENUE Address: Address: City-St-Zip: ST PETERSBURG, FL 33704 City-St-Zip: MIAMI BEACH, FL 33140 Title: () Delete Title: (X) Change () Addition JOHNSON, PAT SIMPSON, ELLEN Name: Name: Address: 2513 EDGEWOOD RD Address: 274 MAHNGANY BAY DRIVE TAMPA, FL 33609 ST JOHNS, FL 32259 City-St-Zip: 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: ROBIN STANFORD V 01/09/2008