FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300005475 (9)

LEADERSHIP SEMINOLE, INC.

Principal Place of Business Mailing Address							 		
SEMINOLE COMMUNITY COLLEGE 100 WELDON BLVD. SANFORD FL 32772-5199			SEMINOLE COMMUNITY COLLEGE 100 WELDON BLVD. SANFORD FL 32773-6132						
						3. Date Incorporated or Qualified 11/29/1993	3. Date Incorporated or Qualified 11/29/1993 3a. Date of Last Report 05/15/1996		
	lace of Business		2a. Mailing Address			4. FEI Number 59-3257486	4. FEI Number Applied For 59-3257486 Not Applicable		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				¢0.7 5	Additional	
22			27			5. Certificate of Status Desired	7	equired	
l City & State			City & State			6. Election Campaign Financing		May Be	
23			Zip Country			Trust Fund Contribution Added to Fees			
Zip 24	25	Country	Z(p 29	30	niry	 This corporation has liability for Florida Statutes 	· intangible tax under s	s. 199.032,	
9, Name and Address of Current Registered Agent						10. Name and Address of New F			
81 Name									
WRIGHT, DAVID					Fore	eman, Douglas	1-1-3		
800 SOUTH ORLANDO AVENEU					305	Address (P.O. Box Number is Not Acceptable) Douglas Ave.			
MAITLAND FL 32751					83				
					84 City		85 Zip	Code	
					Alta	amonte Springs		2714	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617,0503, Florida Statutes.									
SIGNATURE Douglas Foreman						Chairman	1/22/97		
	Signature, lyped or pr	inted name of registered age		AOTL Hegistered	d Agent signature	required when reinstating)	DATE		
12.	CD	OFFICERS AND	D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	RS IN 12	
NAME	WRIGHT, D	A/AD		1 1 1/ 1.2 N/		CD Famomen Dougles	Exi change	Audition	
STREET ADDRESS 800 SOUTH ORLANDO AVENU			HE			Foreman, Douglas 305 Douglas Ave.			
CITY-ST-ZIP MAITLAND FL						Altamonte Springs, FL 32714			
TITLE	CED	<u>' </u>	DELETE	2111		CED	A Change	Addition	
NAME	FOREMAN,	DOUGLAS		2 2 N/	AME	Adamson, Brent		·	
STREET ADDRESS 305 DOUGLAS AVENUE				2 3 S1	REET ADDRESS	401 W. 13th Street			
CITY-ST-ZIP ALTAMONTE SPRINGS FL						Sanford, FL 32771			
TITLE	T		DELETE	3 1 TI	TLE	T	A Change	Addition	
NAME	BLACKBUR		3 2 N/	AME	Blackburn, William				
STREET ADDRESS 4699 W. LAKE MARY BLVD				3 3 STHEET ADDRESS		3505 W. Lake Mary Bl	3505 W. Lake Mary Blvd.		
CITY - ST - ZIP	LAKE MARY	r <u>F</u> L	Donne	-	ITY-ST-ZIP	Lake Mary, FL 32746		1 1220	
TITLE			☐ DELETE	4 1 TI			Change	Addition	
NAME STREET ADORESS				4 2 N	1				
CITY-ST-ZIP					TREET ADDRESS TY-ST-ZIP				
TITLE			DELETE	51 TI		·	Change	Addition	
NAME				5.2 N/	1				
STREET ADORESS					HEET ADDRESS				
CITY-ST-ZIP				5 4 CI	1Y-S1-7IP				
TITLE			☐ DELETE	61 TI) LE		Change	☐ Addition	
NAME				62 N/	AME				
STREET ADDRESS				63 \$1	REET ADDRESS				

14. To 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 annual report or supplemental annual 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 12 pr Block 13 if changed or on an attachment with an address.

to de la trans

1/22/07

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FILED

Jan 30 1997 8:00am

Secretary of State