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**Jan 20 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000003746 (2)

1. Corporation Name
LEADERSHIP GAINESVILLE ALUMNI ASSOCIATION, INC.



Principal Place of Business: 2531 N.W. 41ST STREET SUITE A-3 GAINESVILLE FL 32606

Mailing Address: 2531 N.W. 41ST STREET SUITE A-3 GAINESVILLE FL 32606

3. Date Incorporated or Qualified: **07/15/1996**

4. FEI Number: **59-3389975**

Applied For: Yes No

Not Applicable: Yes No

2. Principal Place of Business (21-24) and Mailing Address (2a-24) fields with sub-fields for Suite, City & State, Zip, and Country.

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

DEEGAN, TIMOTHY P
2531 N.W. 41ST STREET
SUITE A-3
GAINESVILLE FL 32606

10. Name and Address of New Registered Agent

81 Name: _____

82 Street Address (P.O. Box Number is Not Acceptable): _____

83 _____

84 City: _____ FL 85 Zip Code: _____

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DT DEEGAN, TIMOTHY P	1.1 TITLE	D VP
NAME	DEEGAN, TIMOTHY P	1.2 NAME	KENT WALKER
STREET ADDRESS	2531 N.W. 41ST STREET	1.3 STREET ADDRESS	3522 SW 42 Ave.
CITY-ST-ZIP	GAINESVILLE FL 32606	1.4 CITY-ST-ZIP	GAINESVILLE FL 32608
TITLE	DP TOUGAW, TERRY L	2.1 TITLE	
NAME	TOUGAW, TERRY L	2.2 NAME	
STREET ADDRESS	1225 N.W. 20TH PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32609	2.4 CITY-ST-ZIP	
TITLE	D CHRISTIAN, LAWRENCE D	3.1 TITLE	
NAME	CHRISTIAN, LAWRENCE D	3.2 NAME	
STREET ADDRESS	5716 N.W. 62ND COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32653	3.4 CITY-ST-ZIP	
TITLE	WILSON, DWIGHT D	4.1 TITLE	
NAME	WILSON, DWIGHT D	4.2 NAME	
STREET ADDRESS	2531 N.W. 41ST ST., SUITE A-3	4.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32606	4.4 CITY-ST-ZIP	
TITLE	WAGNER, SUSAN K	5.1 TITLE	D
NAME	WAGNER, SUSAN K	5.2 NAME	
STREET ADDRESS	2531 N.W. 41ST ST., SUITE A-3	5.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32606	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	D S
NAME		6.2 NAME	CARLA Rhina Bennett
STREET ADDRESS		6.3 STREET ADDRESS	3004 NW 44th Pl
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Gainesville, FL, 32605

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14. I 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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Timothy P Deegan* 1/16/98 352 337 0020

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0011012

CR2E037 (10/97)