**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # N9600003746

LEADERSHIP GAINESVILLE ALUMNI ASSOCIATION, INC.

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

2. Principal Place of Business

21

Mailing Address

2531 N.W. 41ST STREET

SUITE A-3

26

GAINESVILLE FL 32606

2a. Mailing Address

## **FILED** Feb 22, 1999 8:00 am § Secretary of State

02-22-1999 90025 045 \*\*\*\*61.25

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-	<b>                                    </b>	1887

Date Incorporated or Qualifed 07/15/1996

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2 ~		27					59-33899	<del>//3</del>			t-Applicable
City & State	•	City & 5	City & State  Zip Country				5. Certifcate of	f Status Desired	<u></u>	\$8.75 / Fee Re	
Zip	Country	Zip				6 Cleation		mpaign Financing		\$5.00 May Be	
<b>a</b> '	25	29	Zip Coun			1	•	Contribution		Added i	
4	9. Name and Address of Current			1				Address of New F	Registered	Agent	
	o. Hamo and Addiese o. Camen			8	1 Name		41				
	TIMOTHY P			8:	82 Street Address (P.O. Box Number is Not Acceptable)						
2531 N.W. 41ST STREET					83						
SUITE A-3				"	1			·			
GAINESVILLE FL 32606				8-	4 City				FL	85 Zip (	Code
11 Burguant t	to the provisions of Sections 617.0502	and 617 1508	Florida Statutes	the abor	ve-named	corpora	ation submits thi	s statement for the	purpose of	changing its	registered
office or re	egistered agent, or both, in the State of n familiar with, and accept the obligation	Florida, Such	change was auti	nonized b	y tne corp	oration's	s board of direc	tors. I hereby accep	ot the appoi	ntment as re	gistered
SIGNATURE						non-front	han minetation)		DATE		
	Signature, typed or printed name of registered agent s		. (NOTE: R	egistered Ag 13.	ent signature i	equirea w	hen reinstating) ADDITIONS	CHANGES TO OF		D DIRECTO	RS IN 12
12.	OFFICERS AND	DIRECTORS	DELETE	1.1 TITLE		VΡ		<u></u>		Change	Addition
TITLE	DEEGAN, TIMOTHY P		Deterie			V 1	1 13			7	_
NAME	•			1.2 NAME							
STREET ADDRESS	2531 N.W. 41ST STREET				ET ADDRESS			•	•		
CITY-ST-ZIP	GAINESVILLE FL 32606			1.4 CITY-		-5	1			Change	Addition
TITLE	DVP		☐ DELETE	2.1 TITLE		۲ <i>1</i>	V			M Change	
NAME	WALKER, KENT			2.2 NAME							
STREET ADDRESS	3522 SW 42ND AVE			2.3 STRE	ET ADDRESS		-	• = = • .	**		
CITY-ST-ZIP	GAINESVILLE FL 32608			2. 4 CITY		طعدد	1-			A/Channel	Addition
TITLE	D		☐ DELETE	3.1 TITLE		1	ĮΦ			Change	Addition
NAME	CHRISTIAN, LAWRENCE D			3.2 NAME		ļ			•		
STREET ADDRESS	5716 N.W. 62ND COURT			3.3 STRE	ET ADDRESS						
CITY-ST-ZIP	GAINESVILLE FL 32653			3.4. CITY	-ST-ZIP						
TITLE	DS		☐ DELETE	4.1 TITLE						Change	☐ Addition
NAME	CARLA RHINE BENNETT			4. 2 NAM	E						
STREET ADDRESS	3004 NW 44TH PL			4.3 STRE	ET ADDRESS						
CITY-ST-ZIP	GAINESVILLE FL 32605			4.4 CITY-	ST-ZIP						
TITLE	P		☐ DELETE	5.1 TITLE		D				Change	Addition
NAME	WAGNER, SUSAN K			5.2 NAME	:					•	
STREET ADDRESS	2531 N.W. 41ST ST., SUITE A-3			5.3 STRE	ET ADDRESS						
CITY-ST-ZIP	GAINESVILLE FL 32606			5.4 CITY-	ST-ZIP						
TITLE			DELETE	6.1 TITLE						Change	☐ Addition
NAME				6.2 NAME							
STREET ADDRESS				6.3 STRE	ET ADORESS	Ì					
				6.4 CITY-	ST-ZIP						
C/TY-ST-ZIP	ertify that the information supplied with	11 1 611				1 1 - 0 -	-4 440 07/0V	\ Elorida Statutos	I di mala an an	diff. that the	(

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 any attachment with an address, with all other like empowered.

SIGNATURE: