# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000003746

FILED May 04, 2009 Secretary of State

Entity Name: LEADERSHIP GAINESVILLE ALUMNI ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

300 EAST UNIVERSITY AVE SUITE 100 GAINESVILLE, FL 32601

**New Mailing Address: Current Mailing Address:** 

9200 NW 36TH PLACE PO BOX 1561 GAINESVILLE, FL 32602 GAINESVILLE, FL 32606

FEI Number: 59-3389975 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WELCH, DAVID S 2951 SE 24TH PLACE GAINESVILLE, FL 32641 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 V. FIELDS, MARGARET DR V. FIELDS, MARGARET DR Name: Name: 2445 NW 14TH PLACE Address: 2445 NW 14TH PLACE Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: GAINESVILLE, FL 32605

Title: () Delete Title: (X) Change ( ) Addition Name:

TAYLOR, CANDACE Name: TAYLOR, CANDACE Address: 7717 NW 218 STREET Address: 7717 NW 218 STREET City-St-Zip: ALACHUA, FL 32615 City-St-Zip: ALACHUA, FL 32615

Title: VΡ () Delete Title: (X) Change ( ) Addition

MITROOK, KIM MITROOK, KIM Name: Name: 9449 SW 32ND LANE Address: Address: 9449 SW 32ND LANE City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: GAINESVILLE, FL 32608

Title: PΕ () Delete Title: (X) Change ( ) Addition

LOWERY, TERRI Name: Name: LOWERY, TERRI 4742 SW 88 DRIVE Address: Address: 4742 SW 88 DRIVE City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: GAINESVILLE, FL 32608

Title: () Delete Title: () Change () Addition

WELCH, DAVID Name: Name: 2951 SE 24TH PLACE Address: Address: City-St-Zip: GAINESVILLE, FL 32641 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

TESCH-VAUGHT, KIM TESCH-VAUGHT, KIM Name: Name: Address: 2139 NW 30TH PLACE Address: 2139 NW 30TH PLACE GAINESVILLE, FL 32605 GAINESVILLE, FL 32605 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: DAVID WELCH **TRES** 05/04/2009