

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010053

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: SEMINAR FOR TOMORROW'S LEADERS, INC.

## Current Principal Place of Business:

C/O 1759 S KINGS AVE  
BRANDON, FL 33511

## New Principal Place of Business:

11915 - 81ST AVENUE N.  
SEMINOLE, FL 33772

## Current Mailing Address:

C/O 1759 S KINGS AVE  
BRANDON, FL 33511

## New Mailing Address:

11915 - 81ST AVENUE N.  
SEMINOLE, FL 33772

FEI Number: 14-1900893

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHULER, TIMOTHY C  
9075 SEMINOLE BLVD  
SEMINOLE, FL 33772 US

## Name and Address of New Registered Agent:

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:

Title: DV ( ) Delete  
Name: FEE, JEFF  
Address: 120 MORNINGSIDE DRIVE  
City-St-Zip: LAKE LAND, FL 33803

Title: D ( ) Delete  
Name: FOSTER, RALPH  
Address: 6240 SEMINOLE BLVD  
City-St-Zip: SEMINOLE, FL 33772

Title: DS ( ) Delete  
Name: GRIFFING, DONALD A  
Address: 1303 TALBOT CIR  
City-St-Zip: AVON PARK, FL 33825

Title: D ( ) Delete  
Name: RENFRO, WENDY  
Address: 4114 EAGLE CT  
City-St-Zip: SEBRING, FL 33872

Title: CP ( ) Delete  
Name: MEYER, DOUGLAS  
Address: 11915-81 AVE NORTH  
City-St-Zip: SEMINOLE, FL 33772

Title: DT ( ) Delete  
Name: LEMAR, SR, DAVID A CPA  
Address: 673 WEST LUMSDEN ROAD  
City-St-Zip: BRANDON, FL 33511

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: LARGE, GEOFFREY S  
Address: 10 TERA LANE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: TIMOTHY C. SCHULER

RA

04/07/2009

Electronic Signature of Signing Officer or Director

Date