I hereby 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 all other like empowered.

TREASURER

SIGNATURE: SEAN K. QUIGLEY

L

City-State-Zip: PENSACOLA FL 32503

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail :				
Title	D	Title	D	
Name	LARSON, KURT	Name	QUIGLEY, SEAN K	
Address	2225 INVERNESS DRIVE	Address	P. O. BOX 12484	
City-State-Zip:	PENSACOLA FL 32503	City-State-Zip:	PENSACOLA FL 32502	
Title	DIRECTOR, PRESIDENT			
Name	GRISSETT, SCOTT			
Address	2225 INVERNESS DRIVE			

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

Current Principal Place of Business: 2225 INVERNESS DRIVE PENSACOLA, FL 32503

Current Mailing Address:

DOCUMENT# N0900002044

2225 INVERNESS DRIVE PENSACOLA. FL 32503

FEI Number: 35-2358180

Name and Address of Current Registered Agent:

LARSON, KURT 2225 INVERNESS DRIVE PENSACOLA, FL 32503 US

Entity Name: LEADERSHIP PENSACOLA ALUMNI ASSOCIATION, INC.

FILED Apr 30, 2019 Secretary of State 8290713455CC

Certificate of Status Desired: No

Date

04/30/2019 Date