

2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N12000001249

Entity Name: LEEDS ENDOWMENT, INC.

Current Principal Place of Business:

435 SOUTHERN BLVD
WEST PALM BEACH, FL 33405

Current Mailing Address:

435 SOUTHERN BLVD
WEST PALM BEACH, FL 33405 US

FEI Number: 45-4440485

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARMOUR, ALAN I
3001 PGA BLVD
SUITE #305
PALM BEACH GARDENS, FL 33410 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

Officer/Director Detail :

Title PRESIDENT
Name FORD, SUSAN
Address 435 SOUTHERN BLVD
City-State-Zip: WEST PALM BEACH FL 33405

Title D
Name FORD, GEORGE
Address 435 SOUTHERN BLVD
City-State-Zip: WEST PALM BEACH FL 33405

Title VP
Name FORD, DANIELLE
Address 435 SOUTHERN BLVD
City-State-Zip: WEST PALM BEACH FL 33405

Title DIRECTOR
Name WICK, WALTER
Address 435 SOUTHERN BLVD.
City-State-Zip: WEST PALM BEACH FL 33405

Title DIRECTOR
Name TAYLOR, MEGHAN
Address 435 SOUTHERN BLVD.
City-State-Zip: WEST PALM BEACH FL 33405

Title TREASURER
Name BARTLE, JAMES
Address 435 SOUTHERN BLVD
City-State-Zip: WEST PALM BEACH FL 33405

Title SECRETARY
Name WATERBURY, SUSAN
Address 435 SOUTHERN BLVD
City-State-Zip: WEST PALM BEACH FL 33405

Title DIRECTOR
Name IVANCEVIC, NICK
Address 435 SOUTHERN BLVD
City-State-Zip: WEST PALM BEACH FL 33405

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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.

SIGNATURE: SUSAN WATERBURY

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09/22/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name SARGENT, KIM

Address 435 SOUTHERN BLVD

City-State-Zip: WEST PALM BEACH FL 33405