2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 635573

Entity Name: LEADERSHIP CENTERS, U.S.A., INC.

Current Principal Place of Business:

8286 BAYBERRY RD JAX. FL 32256

Current Mailing Address:

8286 BAYBERRY RD JAX. FL 32256 US

FEI Number: 59-1978264 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LOMAX, KATIE 8286 BAYBERRY RD JACKSONVILLE, FL 32256 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: KATIE LOMAX 02/15/2024

> Date Electronic Signature of Registered Agent

FILED Feb 15, 2024

Secretary of State

7262079535CC

Date

Officer/Director Detail:

Address

Address

Title **SECRETARY** Title DIRECTOR

HOSCH, CHESTER J Name Name SCOTT, KATHERINE A 1075 PEACHTREE STREET NE Address Address 8286 BAYBERRY RD

> **SUITE 3000** City-State-Zip: JAX FL 32256

City-State-Zip: ATLANTA GA 30309

Title CEO, DIRECTOR Title **DIRECTOR**

Name HESTERMAN, CYNTHIA L Name DARDEN, JOHN M III Address 8286 BAYBERRY RD 8286 BAYBERRY RD

JAX FL 32256 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER. DIRECTOR Title DIRECTOR

Name EARLEY, MICHAEL M SCOTT, PATRICK W Name

Address 8286 BAYBERRY RD Address 8286 BAYBERRY RD

City-State-Zip: JAX FL 32256 City-State-Zip: JAX FL 32256

DIRECTOR Title

Electronic Signature of Signing Officer/Director Detail

Name CARTER, BUD

City-State-Zip: JAX FL 32256

8286 BAYBERRY RD

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

02/15/2024 SIGNATURE: CYNTHIA L. HESTERMAN CEO