

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737607

FILED  
Feb 06, 2009  
Secretary of State

Entity Name: LEADERSHIP JACKSONVILLE, INC.

## Current Principal Place of Business:

4040 WOODCOCK DR.  
STE. #155  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

## Current Mailing Address:

4040 WOODCOCK DR.  
STE. #155  
JACKSONVILLE, FL 32207

## New Mailing Address:

FEI Number: 59-1718154      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPENCE, ISABELLE O  
4040 WOODCOCK DR, STE 155  
JACKSONVILLE, FL 32207      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: PE ( ) Delete  
Name: BOTTARO, JOHN  
Address: 10748 DEERWOOD PK BLVDS  
City-St-Zip: JACKSONVILLE, FL 32256

Title: IP ( ) Delete  
Name: RAMSEY, SANDRA  
Address: 6600 CORPORATE CENTER PKWY  
City-St-Zip: JACKSONVILLE, FL 32216

Title: PE ( ) Delete  
Name: BISHOP, BEN  
Address: 1225 SALT CREEK ISLAND  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: TS ( ) Delete  
Name: KILGO, NANCY  
Address: 1647 CHALLENGE AVE  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D ( ) Delete  
Name: BALANKY, MIKE  
Address: 833 WATERMAN RD N  
City-St-Zip: JACKSONVILLE, FL 32207

Title: M ( ) Delete  
Name: SPENCE, ISABELLE O  
Address: 11 SEA WINDS LN EAST  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BISHOP, BEN  
Address: 1225 SALT CREEK ISLAND  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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

Title: PE (X) Change ( ) Addition  
Name: CANTY, STEVE  
Address: 3807 COOPERS LAKE ROAD  
City-St-Zip: JACKSONVILLE, FL 32224

Title: TS (X) Change ( ) Addition  
Name: BLOUNT, MICHAEL  
Address: 1421 UNIVERSITY BOULEVARD WEST  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change ( ) Addition  
Name: KILGO, NANCY  
Address: 1647 CHALLENGE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32205

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: ISABELLE OWEN SPENCE

M

02/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date