

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

RECEIVED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

09 NOV 10 PM 2:36

DOCUMENT # 755204

1. Corporation Name

Florida Leadership Foundation, Inc.

2. Principal Office Address - No P.O. Box #

5586 Superior Drive

3. Mailing Office Address

PO Box 893

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lakeland, Florida

City & State

Highland City, Florida

Zip

33805

Country

USA

Zip

33846

Country

USA

200162646892  
11/10/09--01003--001 \*\*122.50  
CR2E081 (12/08)

4. Date Incorporated or Qualified  
To Do Business in Florida

04-16-1981

5. FEI Number  
59-2090306

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Ron Garrison

Street Address (P.O. Box Number is Not Acceptable)

13042 Social Lane

Suite, Apt. #, Etc.

City

Winter Garden

State

FL

Zip Code

34787

☒ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Date

REGISTERED AGENT MUST SIGN

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P	Todd Chaney	5586 Superior Drive	Lakeland, FL 33805
D/V	Abbye Feeley	5623 47th Avenue North	Kenneth City, FL 33709
D/T	Ronald Garrison	13042 Social Lane	Winter Garden, FL 34787
D	Michael Carter	6651 Crescent Wood Circle	Lakeland, FL 33813
D	Steven Hall	166 Dawn Lauren Lane	Tallahassee, FL 32301

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Todd Chaney*

Todd Chaney

10/28/2009

863-698-4492

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #