2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# 757583

Entity Name: LEOPARD QUARTERBACK CLUB OF BROOKSVILLE, INC.

Current Principal Place of Business:

700 BELL AVENUE
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

P.O BOX 633
BROOKSVILLE, FL 346050633

New Mailing Address:

FEI Number: 59-2269062 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DONATO, DAVID
419 HILLSIDE COURT
BROOKSVILLE, FL 34601 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: SD ( ) Delete
Name: KLINGENSMITH, KAREN
Address: P O BOX 633
City-St-Zip: BROOKSVILLE, FL 34605

Title: VD ( ) Delete
Name: BLAND, MISSY
Address: PO BOX 633
City-St-Zip: BROOKSVILLE, FL 34605

Title: TD ( ) Delete
Name: EMERSON, STEPHEN
Address: P O BOX 633
City-St-Zip: BROOKSVILLE, FL 34605

Title: PD ( ) Delete
Name: DONATO, DAVID
Address: P O BOX 633
City-St-Zip: BROOKSVILLE, FL 34605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: KESSLER, SEAN
Address: PO BOX 633
City-St-Zip: BROOKSVILLE, FL 34605

Title: TD (X) Change ( ) Addition
Name: TIMMONS, THERESA
Address: P O BOX 633
City-St-Zip: BROOKSVILLE, FL 34605

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: DAVID DONATO PD 04/14/2009

Electronic Signature of Signing Officer or Director — Date