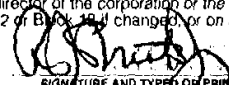


FILED

Apr 09 1997 8:00am

Secretary of State

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT STATE Sandra B. Morin Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F96000006079 (5) 1. Corporation Name THE AMERICAN LEADERSHIP FOUNDATION INC.			
Principal Place of Business 3512 BERGER RD LUTZ FL 33549-4759		Mailing Address 3512 BERGER RD LUTZ FL 33549-4759	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 11/20/1996		3a. Date of Last Report 11/20/1996	
4. FEI Number APPLIED FOR 31-1483973		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No		10. Name and Address of New Registered Agent 11 Name 12 Street Address (P.O. Box Number is Not Acceptable) 13 City 14 State FL 15 Zip Code	
9. Name and Address of Current Registered Agent SHORT, ROBERT JR THE AMERICAN LEADERSHIP FOUNDATION 3512 BERGER RD LUTZ FL 33549-4759			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable		DATE Agent signature required when reinstating	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHORT, ROBERT J SR 110 MONTGOMERY PL ALEXANDRIA VA 22314	☐ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SHORT, ROBERT J JR 3512 BERGER RD LUTZ FL 33549-4759	☐ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BARTOLUTTI, LEONARD F 13924 BRIARDALE LN TAMPA FL 33618	☐ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	☐ Change ☐ Addition
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.			
SIGNATURE: 		Date: DT JR. - Resident	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # 0043929	

CR2E037 (9/96)