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Mar 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H53152

(5)

1. Corporation Name

LEADER ENTERPRISES, INC.

Principal Place of Business

% ROBERT E. FRALEY
390 N. ORANGE AVE. #2600
ORLANDO FL 32801-8642

Mailing Address

C/O RICHARD E. NEAL
380 NORTH ORANGE AVENUE SUITE 2600
ORLANDO FL 32801-1687



3. Date Incorporated or Qualified

04/22/1985

3a. Date of Last Report

04/27/1996

4. FEI Number

59-2651632

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

25 Suite, Apt. #, etc.

26 City & State

27 Zip

28 Country

9. Name and Address of Current Registered Agent

NEAL, RICHARD E ESQ
390 N. ORANGE AVE. #2600
ORLANDO FL 32801-1642

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
DC	FRALEY, ROBERT E.	390 N. ORANGE AVE. #2600	ORLANDO FL	<input type="checkbox"/>
PD	CHAPIN, ROBB W.	390 N. ORANGE AVE. #2600	ORLANDO FL	<input type="checkbox"/>
V	MOORMAN, DAVID	390 N ORANGE AVE #2600	ORLANDO FL	<input checked="" type="checkbox"/>
V	LIMBAUGH, TOMMY	390 N ORANGE AVE #2600	ORLANDO FL	<input checked="" type="checkbox"/>
D	FRALEY, DIXIE	390 N ORANGE AVE #2600	ORLANDO FL	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
D/EVP/T	Amerman, Mark W.	390 N. Orange Ave., #2600	Orlando, FL 32801	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change	Addition
D/EVP	Ardan, Ivan N.	390 N. Orange Ave., #2600	Orlando, FL 32801	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change	Addition
D	Green, H. Charles, Jr.	860 Brightwater Circle	Maitland, FL 32751	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
V/S	Neal, Richard E.	390 N. Orange Ave., #2600	Orlando, FL 32801	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
V	Fogerty, Steven S.	390 N. Orange Ave., #2600	Orlando, FL 32801	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition
AT	Zadrozny, Kristina M.	390 N. Orange Ave., #2600	Orlando, FL 32801	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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, 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 authorized officer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robb W. Chapin, President

2-25-97

(407)425-4900

Date

Daytime Phone

CR2E034 (9/96)