

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005964

FILED
May 02, 2007
Secretary of State

Entity Name: THE STUDENT LEADERSHIP ACADEMY OF VENICE, INC.

Current Principal Place of Business:

200 FIELD AVE E
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

200 FIELD AVE E
VENICE, FL 34285

New Mailing Address:

FEI Number: 20-0551369 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NORTON, ED
1309 GREENFIELD CIR
VENICE, FL 34292 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: DST () Delete
Name: NORTON, ED
Address: 1309 GREENFIELD CIRCLE
City-St-Zip: VENICE, FL 34292

Title: P () Delete
Name: MACLELLAN, NORMAN
Address: 4301 CORSO VENETIA
City-St-Zip: VENICE, FL 34293

Title: VP () Delete
Name: TRAMMELL, THOMAS
Address: 101 W. VENICE AVE #10
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: THOMPSON, JOHN
Address: 1151 DONA WAY
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: GILSON, IRENE
Address: 336 CORAL ST
City-St-Zip: VENICE, FL 34285

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: THOMAS TRAMMELL

VP

05/02/2007

Electronic Signature of Signing Officer or Director

_____ Date