## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000009145

FILED May 12, 2006 Secretary of State

Entity Name: VANGUARD LEADERSHIP INSTITUTE, INC.

Current P	Principal Place of Business:	New Principal Place	of Business:	
12278 E. COLONIAL DR., SUITE 400 ORLANDO, FL 32826			1910 SOUTH TANNER ROAD ORLANDO, FL 32820	
Current N	Mailing Address:	New Mailing Addres	s:	
12278 E. COLONIAL DR., SUITE 400 ORLANDO, FL 32826			1910 SOUTH TANNER ROAD ORLANDO, FL 32820	
n accordar	r: 55-0875550 FEI Number Applied For ( ) nce with s. 607.193(2)(b), F.S., the corporation did not re d Address of Current Registered Agent:		Certificate of Status Desired ( )  of New Registered Agent:	
12278 E. ( ORLAND( The above	EZ, GARY COLONIAL DR., SUITE 400 D, FL 32826 US e named entity submits this statement for the pure of Florida.	pose of changing its registere	ed office or registered agent, or both,	
SIGNATU				
31014/110			Date	
	Electronic Signature of Registered Agent S AND DIRECTORS:		Date ES TO OFFICERS AND DIRECTOR	
<b>DFFICER</b> Title: Name: Address:	Electronic Signature of Registered Agent			
DFFICER  itle: lame: lddress: city-St-Zip: itle: lame: lddress:	Electronic Signature of Registered Agent S AND DIRECTORS:  PD () Delete GONZALEZ, GARY 2232 CYPRESS TRACE CIRCLE	ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTOR	
	Electronic Signature of Registered Agent S AND DIRECTORS:  PD ( ) Delete GONZALEZ, GARY 2232 CYPRESS TRACE CIRCLE ORLANDO, FL 32825  VD ( ) Delete GONZALEZ, CONSTANCE 2232 CYPRESS TRACE CIRCLE	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	ES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition	
DFFICER Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Address: Name: Address:	Electronic Signature of Registered Agent S AND DIRECTORS:  PD () Delete GONZALEZ, GARY 2232 CYPRESS TRACE CIRCLE ORLANDO, FL 32825  VD () Delete GONZALEZ, CONSTANCE 2232 CYPRESS TRACE CIRCLE ORLANDO, FL 32825  D () Delete PICON, FORTUNATO JR. 528 WILMINGTON CIR.	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: Address: Address: Address:	ES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: CONSTANCE GONZALEZ VD 05/12/2006