

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009659

FILED  
Sep 07, 2006  
Secretary of State

**Entity Name:** NELSON LEADERSHIP INITIATIVES, INC.

**Current Principal Place of Business:**

4255 S.W. 153 TERR.  
MIRAMAR, FL 33027

**New Principal Place of Business:**

**Current Mailing Address:**

4255 S.W. 153 TERR.  
MIRAMAR, FL 33027

**New Mailing Address:**

**FEI Number:** 20-1664073      **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:**

**Name and Address of New Registered Agent:**

NELSON, GALE S  
4255 S.W. 153 TERR.  
MIRAMAR, FL 33027      US

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: D      ( ) Delete  
Name: NELSON, GALE S  
Address: 4255 S.W. 153 TERR.  
City-St-Zip: MIRAMAR, FL 33027

Title: D      ( ) Delete  
Name: NELSON, SHAUNTELL D  
Address: 4255 S.W. 153 TERR.  
City-St-Zip: MIRAMAR, FL 33027

Title: D      ( ) Delete  
Name: KEELS, EUGENE  
Address: 10900 S.W. 196 ST., STE. 425N  
City-St-Zip: MIAMI, FL 33157

Title: D      ( ) Delete  
Name: PETTAWAY, ROBERT SR.  
Address: 18661 LENAIRE DR.  
City-St-Zip: MIAMI, FL 33157

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D      (X) Change ( ) Addition  
Name: WILLINGALE, MARTIN  
Address: 4255 S.W. 153 TERR.  
City-St-Zip: MIRAMAR, FL 33027

Title: D      (X) Change ( ) Addition  
Name: BAEZ, RAUL  
Address: 4255 SW 153 TERRACE  
City-St-Zip: MIRAMAR, FL 33027

Title: D      (X) Change ( ) Addition  
Name: KATO, LILI  
Address: 4255 SW 153 TERRACE  
City-St-Zip: MIRAMAR, FL 33027

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: GALE S NELSON

PD

09/07/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date