2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011475

FILED Apr 14, 2009 Secretary of State

Entity Name: NATIONAL LEADERSHIP INSTITUTE, INC.

Current Principal Place of Business: New Principal Place of Business: 2001 WEST SAMPLE ROAD SUITE 101 POMPANO BEACH, FL 33064 US **New Mailing Address: Current Mailing Address:** 2561 CORDOBA BEND WESTON, FL 33327 FEI Number: 20-2051262 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CZARNECKI, GERALD M 2001 WEST SAMPLE ROAD SUITE 101 POMPANO BEACH, FL 33064 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CZARNECKI, GERALD M Name: Name: Address: 2001 WEST SAMPLE ROAD, SUITE 101 Address: City-St-Zip: POMPANO BEACH, FL 33064 US City-St-Zip: Title: () Delete Title: (X) Change () Addition CHIN, CAROLINE Name: Name: CHIN, CAROLINE Address: 3100 N.E. 48TH STREET, PH12 Address: 3100 N.E. 48TH STREET, PH 12 City-St-Zip: FORT LAUDERDALE, FL 33308 US City-St-Zip: FORT LAUDERDALE, FL 33308 US Title: () Delete Title: () Change () Addition DANOVICH, DAVID Name: Name: 600 LEXINGTON AVENUE, 9TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10022 City-St-Zip: T () Delete MAMORSKY, JEFFREY D Title: Title: () Change () Addition Name: Name: Address: 200 PARK AVENUE Address: City-St-Zip: NEW YORK, NY 10166 City-St-Zip:

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: LINDA L THAYER ED 04/14/2009