

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011121

FILED  
May 18, 2007  
Secretary of State

**Entity Name:** LEADERS OF TOMORROW REPUBLICAN CLUB, INC.

**Current Principal Place of Business:**

6100 ARLINGTON EXPRESSWAY, #0-304  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

2724 COLLEGE ST.  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

6100 ARLINGTON EXPRESSWAY, #0-304  
JACKSONVILLE, FL 32211

**New Mailing Address:**

2724 COLLEGE ST.  
JACKSONVILLE, FL 32205

**FEI Number:** 59-1433860      **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:**

GILLESPIE, JOANN  
6100 ARLINGTON EXPRESSWAY, #0-304  
JACKSONVILLE, FL 32211      US

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

LESTER, NICOLE  
2724 COLLEGE ST.  
JACKSONVILLE, FL 32205      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: NICOLE LESTER

05/18/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: SEYMORE, LEON B  
Address: 525 NEW BRUNSWICKS TERR.  
City-St-Zip: JACKSONVILLE, FL 32221

Title: VD      ( ) Delete  
Name: PEACOCK, TONY  
Address: 2155 ART MUSEUM DR.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD      ( ) Delete  
Name: ANSLEY, MARK V  
Address: 7034 LUKE ST.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: SD      ( ) Delete  
Name: GILLESPIE, JOANN  
Address: 6100 ARLINGTON EXPRESSWAY, #0-304  
City-St-Zip: JACKSONVILLE, FL 32211

Title: TD      ( ) Delete  
Name: BROWN, BENJAMIN J  
Address: 4518 REED BARK LANE  
City-St-Zip: JACKSONVILLE, FL 32246

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

Title: PD      (X) Change ( ) Addition  
Name: SEYMORE, LEON B DR  
Address: 525 NEW BRUNSWICK TERR.  
City-St-Zip: JACKSONVILLE, FL 32221

Title: VD      (X) Change ( ) Addition  
Name: ALLEN, OMEGA  
Address: 1474 ELSA DR  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD      (X) Change ( ) Addition  
Name: PLATTE, DON  
Address: 1783 DAYTONA LN  
City-St-Zip: JACKSONVILLE, FL 32218

Title: SD      (X) Change ( ) Addition  
Name: LESTER, NICOLE  
Address: 2724 COLLEGE ST.  
City-St-Zip: JACKSONVILLE, FL 32205

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: DR. LEON B. SEYMORE

PD

05/18/2007

Electronic Signature of Signing Officer or Director

Date