2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007315

FILED Apr 21, 2007 Secretary of State

Entity Name: INNOVATION LEADERSHIP FOUNDATION, INC.

urrent P	rincipal Place	e of Business:	New Principal Plac	e of Business:
	ISTABLE CIRC D, FL 32817	CLE		
urrent M	lailing Addres	ss:	New Mailing Addre	ess:
	ISTABLE CIRC D, FL 32817	CLE		
I Number	: 20-5227865	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
952 DUN	NE, KERRY A ISTABLE CIRC D, FL 32817	CLE US		
	e named entity e of Florida.	submits this statement for the p	purpose of changing its register	red office or registered agent, or both,
the State	e of Florida.	submits this statement for the	ourpose of changing its register	red office or registered agent, or both,
the State	e of Florida. RE:	submits this statement for the particles of Registered Ag		red office or registered agent, or both, Date
the State	e of Florida. RE:	nic Signature of Registered Ag	ent	
the State	e of Florida. RE: Electror S AND DIREC	nic Signature of Registered Ag TORS:) Delete (ERRY A BLE CIRCLE	ent	Date
the State GNATUF FFICERS le: me: dress:	e of Florida. RE: Electror S AND DIREC D (AUGUSTINE, K 7952 DUNSTAI ORLANDO, FL	nic Signature of Registered Ag TORS:) Delete ERRY A BLE CIRCLE 32817) Delete IRC AY	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR
the State GNATUF FFICERS e: me: dress: y-St-Zip: e: me: dress:	e of Florida. RE: Electron S AND DIREC D (AUGUSTINE, K 7952 DUNSTAI ORLANDO, FL D (STANAKIS, MA 2140 DYAN W, MAITLAND, FL	nic Signature of Registered Agerons: TORS: Delete EERRY A BLE CIRCLE 32817 Delete ARC AY 32751 Delete VIN AVENUE	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR () 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: KERRY A AUGUSTINE D 04/21/2007