

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008551

FILED
Mar 20, 2009
Secretary of State

Entity Name: MARKETPLACE LEADERSHIP INTERNATIONAL, INC.

Current Principal Place of Business:

35 RAMONA ST
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

35 RAMONA ST
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 20-5419493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUNY, PAUL
35 RAMONA ST
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

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: CUNY, PAUL
Address: 35 RAMONA ST
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: YOUNG, JIM
Address: 8132 WEKIVA WAY
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: CUNY, GERALDINE
Address: 35 RAMONA ST
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: GOSSELIN, ROBERT J SR.
Address: 1935 E. WINDY WAY
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: SANDERS, ROBERT J
Address: 4325 VERONA AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: PAUL CUNY

MR.

03/20/2009

Electronic Signature of Signing Officer or Director

Date