2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000007628

FILED Dec 12, 2008 Secretary of State

Entity Name: LEADERSHIP IMPACT FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 2404 ADAGIO WAY SARASOTA, FL 34231 **Current Mailing Address: New Mailing Address:** 2404 ADAGIO WAY SARASOTA, FL 34231 FEI Number: 26-1566366 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: LEE, HOWARD G 2014 FOURTH ST SARASOTA, FL 34237 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: H. GREG LEE Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROBBINS, LOYD Name: Name: Address: 2404 ADAGIO WAY Address: City-St-Zip: SARASOTA, FL 34231 City-St-Zip: Title: Title: VΡ () Delete (X) Change () Addition Name: MEEKS, JIM Name: MEEKS, JIM Address: 22 SOUTH LINKS AVE. SUITE 300 Address: 462 SOUTH 4TH AV. SUITE 1900 City-St-Zip: SARASOTA, FL 34236 City-St-Zip: LOUISVILLE, KY 40202 Title: SEC () Delete Title: () Change () Addition GASSEL, GARY Name: Name: 13330 NORTH BRANCH RD Address: Address: City-St-Zip: SARASOTA, FL 34240 City-St-Zip: Title: **TRES** () Delete Title: () Change () Addition Name: HOHMEIER, TOM Name: 1861 STERLING HEIGHTS CT Address: Address: City-St-Zip: ANTIOCH, IL 60002 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: LOYD ROBBINS PRES 12/12/2008