

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008837

FILED  
Jul 21, 2009  
Secretary of State

**Entity Name:** THE INSTITUTE FOR LOCAL GOVERNMENT STUDIES, INC.

**Current Principal Place of Business:**

3711 NW 59TH PLACE  
GAINESVILLE, FL 32653

**New Principal Place of Business:**

**Current Mailing Address:**

3711 NW 59TH PLACE  
GAINESVILLE, FL 32653

**New Mailing Address:**

**FEI Number:** 26-1305555      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD  
SUITE A-100  
TAMPA, FL 336123425 US

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

BRADDY, EDWARD B MR.  
3711 NW 59TH PLACE  
GAINESVILLE, FL 32653 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: EDWARD BRADDY

07/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: BRADDY, EDWARD B  
Address: 3711 NW 59TH PLACE  
City-St-Zip: GAINESVILLE, FL 32653

Title: D ( ) Delete  
Name: CLEMONS, CHARLES  
Address: 14654 NW 11TH PLACE  
City-St-Zip: JONESVILLE, FL 32669

Title: D ( ) Delete  
Name: DOMENECH, TONY  
Address: 4926 NW 18TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: MCADAMS, JEFF  
Address: 2524 NE 65TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32609

**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:

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: EDWARD B. BRADDY

PST

07/21/2009

Electronic Signature of Signing Officer or Director

Date