

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003499

FILED
Jul 08, 2009
Secretary of State

Entity Name: LEAP FOR THE FUTURE, INCORPORATED

Current Principal Place of Business:

19141 NORTH WEST 5 COURT
MIAMI GARDENS, FL 33169

New Principal Place of Business:

Current Mailing Address:

19141 NORTH WEST 5 COURT
MIAMI GARDENS, FL 33169

New Mailing Address:

FEI Number: 26-3367913 **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:

CARVIL, LANISE
19141 NORTH WEST 5 COURT
MIAMI GARDENS, FL 33169 US

Name and Address of New Registered Agent:

CARVIL, GENEVIEVE L
19141 NORTH WEST 5 COURT
MIAMI GARDENS, FL 33169 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: GENEVIEVE L. CARVIL

07/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CARVIL, GENEVIEVE L
Address: 19141 NORTH WEST 5 COURT
City-St-Zip: MIAMI GARDENS, FL 33169

Title: DVP () Delete
Name: CARVIL, SR., RAYMOND REV.
Address: 19141 NORTH WEST 5 COURT
City-St-Zip: MIAMI GARDENS, FL 33169

Title: DST () Delete
Name: BELFORT, LA QUOYA
Address: 8901 NORTH WEST 9 AVE
City-St-Zip: MIAMI, FL 33150

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:

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: GENEVIEVE L. CARVIL

DP

07/08/2009

Electronic Signature of Signing Officer or Director

Date