# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jun 17, 2009**
**Secretary of State**

DOCUMENT# N08000008116

**Entity Name:** ILEAD INC.

**Current Principal Place of Business:**

855 COPPERFIELD TER
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

855 COPPERFIELD TER
CASSELBERRY, FL 32707

**New Mailing Address:**

**FEI Number: 80-0247802** **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:**

YOUNGBLOOD, ALAN R
855 COPPERFIELD TER
CASSELBERRY, FL 32707 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: P ( ) Delete
Name: YOUNGBLOOD, ALAN R
Address: 855 COPPERFIELD
City-St-Zip: CASSELBERRY, FL 32707

Title: VP ( ) Delete
Name: YOUNGBLOOD, JULIE
Address: 855 COPPERFIELD TER
City-St-Zip: CASSELBERRY, FL 32707

Title: T ( ) Delete
Name: AYALA, CAROLE
Address: 6800 WOODLAKE DR UNIT 101
City-St-Zip: ORLANDO, FL 32810

Title: S (X) Delete
Name: LABOY, LIZA M
Address: 506 DEW DROP COVE
City-St-Zip: CASSELBERRY, FL 32707

**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: ALAN R. YOUNGBLOOD P 06/17/2009

Electronic Signature of Signing Officer or Director — Date