

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08785

FILED
Mar 21, 2009
Secretary of State

Entity Name: LEADERSHIP LAKELAND ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

228 S. MASSACHUSETTS AVE
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2903
LAKELAND, FL 33806 US

New Mailing Address:

FEI Number: 59-2736319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEDDER, JOSEPH G
2415 NEVADA ROAD
LAKELAND, FL 33803 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: TD () Delete
Name: TEDDER, JOSEPH G
Address: 24515 NEVADA ROAD
City-St-Zip: LAKELAND, FL 33803

Title: VD () Delete
Name: ROSS, LAWRENCE
Address: 858 HANOVER WAY
City-St-Zip: LAKELAND, FL 33813

Title: PD () Delete
Name: BURTON, JOHN
Address: 1482 LONGOAK DRIVE
City-St-Zip: LAKELAND, FL 33813

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: JOHN C. BURTON

PD

03/21/2009

Electronic Signature of Signing Officer or Director

Date