

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000009058

**FILED**  
**Mar 12, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA LEADERSHIP NETWORK, INC.

**Current Principal Place of Business:**

3385 W. LAKESHORE DRIVE  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

133 S. HARBOR DRIVE  
VENICE, FL 34285

**New Mailing Address:**

**FEI Number:** 27-0950023

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

A. BRENT MCPEEK, ESQ. PA  
3986 S. TAMIAMI TRAIL  
VENICE, FL 34293 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  
**Name:** MAXWELL, KATIE  
**Address:** 3385 W. LAKESHORE DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32312

**Title:** VP/T  
**Name:** NACHTSCHEIM, HENRY  
**Address:** 3608 BARBARY DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32309

**Title:** S  
**Name:** SILVA, HENRY  
**Address:** 8691 WHITE SWAN DRIVE #102  
**City-St-Zip:** TAMPA, FL 33614

I hereby 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 all other like empowered.

**SIGNATURE:** KATIE MAXWELL

PRES

03/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date