| AMOUNT DUE | ON OR BEFORE 09/30/98: \$61.25 (IF DISSO ONPROFIT | SOLVED ON OR AFTER | PTEMBER 30, 19 | 998. |
|--|--|---|--|--|
| W co | ONPROFIT PROPATION UAL REPORT 1998 | FLORIDA DEPAR Sandra B. Secretary | MORTHAM | FILED |
| pocu | MENT # N16709 | (0) | | |
| 1. Corporation | EAST FLORIDA LEADERSHIP | ` ' | Λ Τ | SECRETARY OF STATE FALLAHASSEE, FLORIDA |
| ED | | | | |
| | ce of Business | Mailing Address | | |
| 519 E. WASHI LAKE CITY FL US | · · | P.O. BOX 2143 LAKE CITY FL 32055 | | 3. Date Incorporated or Qualified 09/09/1986 |
| | | | | 4. FEI Number Applied For NOT APPLICABLE Not Applicable |
| | Place of Business 2 Georgia St., | 2a. Mailing Address | | 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| Suite, Apt. | . #, etc. | Suite, Apt. #, etc. | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| City & Sta | te ke Citv. Fl 32055 | City & State | | 7. Is this nonprofit corporation a homeowners association? Yes No |
| Zip 24 320 | Country 55 25 Columbia | Zip 3 | Country | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No |
| | 9. Name and Address of Current | Registered Agent | 81 Name | 10. Name and Address of New Registered Agent |
| 1 | IERRILL C P.A. | | 82 Street | Address (P.O. Box Number is Not Acceptable) |
| 505 EAST | DUVAL STREET | | 83 | |
| , - | 7 FL 32055 | | 84 City | FL 85 Zip Code |
| 11. Pursuant | to the provisions of sections 617,0502 at | nd 617.1508, Florida Statutes, if | ne above-named co | rporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered |
| agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes. SIGNATURE | | | | |
| 12. | Signature, typed or printed name of registered agent a OFFICERS AND | | : Registered Agent signatur | e required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PD | X DELETE | 1.1 TITLE | PD Taylor, Tyrome X Change Addition |
| NAME | FENNELL, ROBERT JAMES 519 E. WASHINGTON ST. | • | 1.2 NAME 1.3 STREET ADDRESS | 1432 Georgia St., |
| STREET ADDRESS CITY-ST-ZIP | LAKE CITY FL 32055 | | 1.4 CITY-ST-ZIP | Lake City, Fla 32055 |
| TITLE | VD2 | DELETE | 2.1 TITLE | Change Addition |
| NAME | Washington, Audre' 638 S. Chestnut St. | | 2.2 NAME | |
| STREET ADDRESS CITY-ST-ZIP | LAKE CITY FL 32055 | | 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | |
| TITLE | SD | DELETE | 3.1 TITLE | SD Tongs Bohant \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| NAME | WATERS, MARVYNE | $\overline{\mathbf{x}}$ | 3.2 NAME | SD Jones, Robert POBox 3368, |
| STREET ADDRESS | 2 SPRINGDALE LAKE CITY FL 32055 | | 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | Lake City, Fla. 32056 |
| TITLE | TD | Z DELETE | 4.1 TITLE | TD Alvin George Addition |
| NAME | CARTER, MARGARETT | | 4,2 NAME | i720 2822 N. Church St., |
| STREET ADDRESS CITY-ST-ZIP | RT. 8 BOX 472 LAKE CITY FL 32055 | | 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | Lake City, Fla. 32055 |
| TITLE | VD1 | DELETE | 5.1 TITLE | Change Addition |
| NAME | WINTERS, MELVIN P | _ | 5.2 NAME | 10 11 10- |
| STREET ADDRESS | LAKE CITY FL 32055 | | 5.3 STREET ADDRESS | (B1/1/1V) |
| TITLE | | DELETE | 5.4 CITY-ST-ZIP 6.1 TITLE | 5D Change Addition |
| NAME | - | _ | 6.2 NAME | Anders Richard Lorange Addition 1072 W Jefferson St |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | ا من من ایم ما ا |
| CITY-ST-ZIP 14. I hereby c | I pertify that the information supplied with t | his filing does not qualify for the | 6.4 CITY-ST-ZIP exemption stated in | section 119 07/3)(i) Florida Statutes I further certify that the information |
| indicated on this annual report or supplemental annual report is true and accurate and that my 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 to trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if phanged, or on an attachment with an address. | | | | |
| SIGNATURE: SIGNATURE: 17/14/98 (904)752-2858 SIGNATURE: Date (904)752-2858 Date (904)752-2858 | | | | |
| | | | | |

D Jyrone Taylor 1432 Georgia St. 32055

SD Robert Jones

Abraham Scott Rt. 8 Box 474 32055

TPAIVIN George Rt. 22 BOX 2412 32024

Samuel Thompson 1442 N. Idaho St. 32055

Richard Anders 1072 W. Jefferson St. 32055

V Audre Washington