

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90083 010 ****61.25

DOCUMENT # N21752

1. Entity Name

LEADERSHIP BRANDON ALUMNI, INC.

Principal Place of Business

P. O. BOX 2235
 BRANDON FL 33509

Mailing Address

P. O. BOX 2235
 BRANDON FL 33509-2235

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2909178

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GARDNER, JOHN W
128 W ROBERTSON ST
BRANDON FL 33511

7. Name and Address of New Registered Agent

Name **Cynthia A. Mikos, Esq.**

Street Address (P.O. Box Number is Not Acceptable)
Cynthia A. Mikos, P.A.

205 N. Parsons Ave., Ste. A

City **Brandon**

FL

Zip Code **33510-4515**

8. 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

Signature typed or printed name of registered agent and title if applicable.

Cynthia A. Mikos, Esq.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-9-2000

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CHAMBLISS, ELLEN 1907 DURANT RD VALRICO FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD CONNETT, STEPHEN G 1007 MOOK ST BRANDON FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD YOLIE, SHIVER 11710 US HWY 92E SEFFNER FL 33584	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HAGEMANN, CARL 333 N. FALKENBURG RD A105 TAMPA FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KOWALSKI, AMY 7407 US HWY 301 S RIVERVIEW FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILTON, LADAWN 153 BARRINGTON DR BRANDON FL	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	President / Director Jennifer L. Murphy 1015 Providence Rd. Brandon, FL 33510	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary / Director Cookie Ellis 916 Stratford Manor Dr. Brandon, FL 33510	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer / Director Andrew J. Mason, CPA 106 W. Windhorst Rd., Ste. 101 Brandon, FL 33510-2429	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President-Elect / Director Trish Johnigan 7409 U.S.Hwy. 301 S., Ste. 200 Riverview, FL 33569-4385	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director Cynthia A. Mikos, Esq. 205 N. Parsons Ave., Suite A Brandon, FL 33510-4515	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	N/A	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cynthia A. Mikos, Esq.

Date

Daytime Phone #

3-9-2000

813/654-6855

CR05EN37 10/00