2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21752

FILED Apr 13, 2007 Secretary of State

Entity Name: LEADERSHIP BRANDON ALUMNI, INC.

Current Principal Place of Business: New Principal Place of Business:

330 PAULS DR STE 100 BRANDON, FL 33511

Current Mailing Address: New Mailing Address:

POB 2235

BRANDON, FL 33509

FEI Number: 20-5073202 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TESLIEKO, SUSAN
130 PAULS DR
STE 100

TESLICKO, SUSAN
330 PAULS DR
STE 100

STE 100

BRANDON, FL 33511 US BRANDON, FL 33511 US

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: SUSAN TESLICKO 04/13/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tte: TD () Delete Title: TD (X) Change () Addition

 Name:
 TESLICKO, SUSAN
 Name:
 TESLICKO, SUSAN

 Address:
 808 OAKFIELD DRIVE
 Address:
 330 PAULS DR STE 100

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 BRANDON, FL 33511

Title: P () Delete Title: PD (X) Change () Addition Name: GILL, CAROLE Name: SMITH, BILLIE

 Address:
 808 OAKFIELD DRIVE
 Address:
 330 PAULS DR. STE 100

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 BRANDON, FL 33511

Title: VD () Delete Title: VD (X) Change () Addition
Name: SMITH. BILLIE Name: HALL. MELANIE

 Name:
 SMITH, BILLIE
 Name:
 HALL, MELANIE

 Address:
 330 PAULS DR STE 100
 Address:
 330 PAULS DR STE 100

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 BRANDON, FL 33511

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 BAIERLEIN, KATE
 Name:
 KAZOR, CHRIS

 Address:
 330 PAULS DR STE 100
 Address:
 330 PAULS DR STE 100

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 BRANDON, FL 33511

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN TESLICKO T 04/13/2007