2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2008
Secretary of State

DOCUMENT# N24225

Entity Name: LEADERSHIP TAMPA BAY, INC.

Current Principal Place of Business:

223 S. 12TH STREET
TAMPA, FL 33602

New Principal Place of Business:

12104 COLONIAL ESTATES LANE
RIVERVIEW, FL 33579

Current Mailing Address:

POST OFFICE BOX 1315
TAMPA, FL 336011315

New Mailing Address:

FEI Number: 59-2883950 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BESSETTE, ALICE
223 S. 12TH STREET
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

BESSETTE, ALICE
12104 COLONIAL ESTATES LANE
RIVERVIEW, FL 33579 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: _____ 01/16/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HOFFMAN, DEBRA
Address: 223 S. 12TH STREET
City-St-Zip: TAMPA, FL 33602

Title: VP ( ) Delete
Name: HACKMAN, JIM
Address: 223 S. 12TH STREET
City-St-Zip: TAMPA, FL 33602

Title: T ( ) Delete
Name: MANER, MACHELLE
Address: 223 S. 12TH STREET
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete
Name: BESSETTE, ALICE
Address: 223 S. 12TH STREET
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HACKMAN, JIM
Address: 12104 COLONIAL ESTATES LANE
City-St-Zip: RIVERVIEW, FL 33579

Title: VP (X) Change ( ) Addition
Name: MANER, MACHELLE
Address: 12104 COLONIAL ESTATES LANE
City-St-Zip: RIVERVIEW, FL 33579

Title: T (X) Change ( ) Addition
Name: SHADY, LORI
Address: 12104 COLONIAL ESTATES LANE
City-St-Zip: RIVERVIEW, FL 33579

Title: D (X) Change ( ) Addition
Name: BESSETTE, ALICE
Address: 12104 COLONIAL ESTATES LANE
City-St-Zip: RIVERVIEW, FL 33579

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: ALICE BESSETTE D 01/16/2008
Electronic Signature of Signing Officer or Director — Date