## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNI IAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT #

N46703

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ALPHA LEADERSHIP EDUCATION FOUNDATION, INC.

Principal Place 2027 26TH ST ST PETERSBU	REET SOUTH	Mailing Address 2027 26TH STREET SO ST PETERSBURG FL 3:						
					3. Date Incorporated or Qualified 12/30/1991	3a. Date of Lest Report 04/28/1995		
2. Principal Pla	ace of Business	2a. Mailing Address 26			4. FEI Number 59-3123718	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5 Certificate of Status Desired \$8.75 Additional				
City & State		27 City & State		Fee Required  6. Election Campaign Financing \$5.00 May Be				
23		28		Trust Fund Contribution	Added to Fees			
Ζιρ <b>24</b>	Country 25	Zip <b>29</b>	Country 30			This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	9. Name and Address of Currer	<u> </u>	1,001		10. Name and Address of New R			
			81	Name				
GIVENS, CLARENCE C			82	Street Add	Street Address (P.O. Box Number is Not Acceptable)			
2027 26TH STREET SOUTH ST PETERSBURG FL 33712			83					
			84	City		FL 85 Zip Code		
or registere	o the provisions of Sections 617.0502 ed agent, or both, in the State of Flori h, and accept the obligations of, Sect	da. Such change was authoriz ion 617.0503, Florida Statutes	ted by the corps.	ooration's bo	oration submits this statement for the purp ard of directors. I hereby accept the appo	intment as registered agent. I am		
	Signature, typed or printed name of registered agent			nt signature requi	ed when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS    DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFI	Change Addition		
TITLE	D DIDLEY NIDOLDIL		1.1 TILLE 1.2 NAME	M	c Ivens, clarence c	Change Zaj Kodition		
NAME STREET ADDRESS	BRADLEY, RUDOLPH 424 CENTRAL AVE SUITE 904	4		T ADDRESS 2	027 26TH ST SO T PATERSBURG, FL			
City-St-ZiP	ST PETERSBURG FL	□ DELETE	1,4 CHTY-		T PRITEREDUCA, FL	☐ Change ★ Addition		
TITLE	D	FIDEREIE	2.1 TITLE	<b>P</b>		Change Addition		
NAME	TAYLOR, TEQUILLA		2.2 NAME	7 1000000	eard, Israel	56		
STREET ADDRESS	13413 SUNVALE PLACE			T ADDRESS 3	BOO 38 TH STREET T PETERS BURG, FL	22つり		
CITY-ST-ZIP TITLE	TAMPA FL.	DELETE	2. 4 CITY - 3.1 TITLE	SI-ZIP 3	THE PROPERTY C	Change Addition		
NAME	WILFALK, LENA		3.2 NAME					
STREET ADDRESS	4200 54TH AVE S			T ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL		3.4. CITY-					
TITLE	D	DELETE	4.1 TITLE			☐ Change ☐ Addition		
NAME	HALLIN, RICHARD R		4. 2 NAME					
STREET ADDRESS	6211 SUN BLVD #308		4.3 STREE	T ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL		4.4 CITY-	ST-ZIP				
TITLE	DS	DELETE	5.1 TITLE			Change Addition		
NAME	GIVENS, CEDRIC C		5.2 NAME					
STREET ADDRESS	12909 GORDA CIR E		5.3 STREE	T ADDRESS				
CITY-ST-ZIP	LARGO FL		5 4 CITY-	ST-ZIP	4.5.000			
TITLE		DELETE	6 1 TITLE	ŀ		Change		
NAME			62 NAME					
STREET ADDRESS			63 STREE	T ADDRESS				
CITY-ST-ZIP		14 4 1 6 6 1	64 CITY-		forth a second to be for the second to be se	07/0)(II) Florido Ctot.dos I f.udbo:		
certify that oath; that	t the information indicated on this annu I am an officer or director of the corpo Block 12 or Block 13 if changed, or o	ual report or supplemental and pration or the receiver or truste	nual report is ti ee empowered	ue and accur	for the exemption stated in Section 119. rate and that my signature shall have the nis report as required by Chapter 617, Fig.	same legal effect as if made under		

SIGNATURE: \_

SIGNATURE AND TYPED OR PARTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)