

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N47055 (1)
1. Corporation Name
FLORIDA LEADERSHIP AND EDUCATION FOUNDATION, INC



Principal Place of Business: C/O DR. EUGENE E. TROTTER, 9616 SOUTHWEST 53RD ROAD, GAINESVILLE FL 32608

Mailing Address: C/O DR. EUGENE E. TROTTER, 9616 SOUTHWEST 53RD ROAD, GAINESVILLE FL 32608-4344

3. Date Incorporated or Qualified: 01/29/1992
3a. Date of Last Report: 06/26/1996

2. Principal Place of Business: 21 1008 McCarty Hall, UF, Suite, Apt. #, etc. 22 Gainesville, FL 23 32611-0180, U.S.A. 24

2a. Mailing Address: 26 P. O. Box 110180, Suite, Apt. #, etc. 27 Gainesville, FL 28 32611-0180, U.S.A. 29

4. FEI Number: NOT APPLICABLE
Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: TROTTER, EUGENE E., 9616 SOUTHWEST 53RD ROAD, GAINESVILLE FL 32608

10. Name and Address of New Registered Agent: 81 Name: Dr. Joseph C. Joyce, 82 Street Address (P.O. Box Number is Not Acceptable): 1008 McCarty Hall, UF, 83, 84 City: Gainesville, FL 85 Zip Code: 32611-0180

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation'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: Joseph C. Joyce DATE: Jan 9, 1997
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: STD <input checked="" type="checkbox"/> DELETE	NAME: TROTTER, EUGENE E. STREET ADDRESS: 9616 S.W. 53RD ROAD CITY-ST-ZIP: GAINESVILLE FL	1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: PD <input type="checkbox"/> DELETE	NAME: ROWE, J. B. STREET ADDRESS: 620 N MAIN STREET CITY-ST-ZIP: GAINESVILLE FL	1.2 NAME:	
TITLE: VD <input type="checkbox"/> DELETE	NAME: LESTER, W. B. STREET ADDRESS: PO BOX 178 CITY-ST-ZIP: LABELLE FL	1.3 STREET ADDRESS:	
TITLE: D <input type="checkbox"/> DELETE	NAME: THOMPSON, CHARLES STREET ADDRESS: PO BOX 909 CITY-ST-ZIP: ALACHUA FL	1.4 CITY-ST-ZIP:	
TITLE: D <input type="checkbox"/> DELETE	NAME: WALLEY, RICHARD L. STREET ADDRESS: PO BOX 89 CITY-ST-ZIP: LAKELAND FL	2.1 TITLE:	
TITLE: D <input type="checkbox"/> DELETE	NAME: STUART, MICHAEL J. STREET ADDRESS: 4401 E COLONIAL DRIVE CITY-ST-ZIP: ORLANDO FL	2.2 NAME:	
		2.3 STREET ADDRESS:	
		2.4 CITY-ST-ZIP:	
		3.1 TITLE:	V/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		3.2 NAME:	Lester, W. Bernard
		3.3 STREET ADDRESS:	640 South Main Street
		3.4 CITY-ST-ZIP:	LaBelle, FL 33935
		4.1 TITLE:	S/T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2 NAME:	Thompson, Charles
		4.3 STREET ADDRESS:	Hwy. 441 South @ Hague
		4.4 CITY-ST-ZIP:	Alachua, FL 32615
		5.1 TITLE:	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2 NAME:	Whalley, Richard L.
		5.3 STREET ADDRESS:	302 S. Massachusetts Ave
		5.4 CITY-ST-ZIP:	Lakeland, FL 33801
		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME:	
		6.3 STREET ADDRESS:	
		6.4 CITY-ST-ZIP:	

(List of Directors continued on att.)

14. I do 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 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Joseph C. Joyce DATE: Jan 9, 1997
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)

Florida Leadership Program Foundation, Inc. Document #N47055

Officers and Directors (continued)

D Joseph C. Joyce 1008 McCarty Hall, UF Gainesville, FL 32611-0180	D Kristen Gunter 1720 South Florida Avenue Lakeland, FL 33803
D Donald Bennink Route 1, Box 98 Bell, FL 32619	D Charles F. Hinton 1305 W. Haines Street Plant City, FL 33564
D Valerie Boyd 15000 Old Highway 41 Naples, FL 33999	D Vernell Johnson 19520 168th Street Live Oak, FL 32060
D Scottie J. Butler 5700 SW 34th Street Gainesville, FL 32608	D Carl Loop 5700 SW 34th Street Gainesville, FL 32608
D Larry J. Connor 2001 McCarty Hall, UF Gainesville, FL 32611-0270	D Jack Norris 25450 Airport Road Punta Gorda, FL 33950
D Jeff Doran 325 West Park Avenue Tallahassee, FL 32302	D Bill Reese 2025 NE 70th Street Ocala, FL 34479
D June Duda 1233 Litard Knot Creek Trail Oviedo, FL 32765	D Kay Richardson 22515 NW 60th Avenue Evinston, FL 32633
D Erroll Fielding 815 Lake Elbert Court, NE Winter Haven, FL 33881-4360	D Christine T. Stephens 1038 McCarty Hall, UF Gainesville, FL 32611-0210
D Lori Frazee 1528 SE 20th Court Cape Coral, FL 33990	