


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007 8:00 am
Secretary of State

01-17-2007 90050 008 ****61.25

DOCUMENT # N47055							
1. Entity Name UNIVERSITY OF FLORIDA LEADERSHIP AND EDUCATION FOUNDATION, INC.							
Principal Place of Business 1008 MCCARTY HALL UF GAINESVILLE, FL 32611-0180 US			Mailing Address PO BOX 110180 GAINESVILLE, FL 32611-0180 US				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		4. FEI Number NOT APPLICABLE			
Applied For		Not Applicable					
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
JOYCE, DR JOSEPH C 1008 MCCARTY HALL UF GAINESVILLE, FL 32611			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
			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. I am familiar with, and accept the obligations of registered agent.			1/10/07	
SIGNATURE: <i>Joseph C Joyce</i> Joseph C Joyce, Executive Director			DATE				
Filing Fee is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	BUTLER, SCOTTIE J		NAME	See attached for additions and deletions			
STREET ADDRESS	P.O. BOX 147030		STREET ADDRESS				
CITY-ST-ZIP	GAINESVILLE, FL 326147030		CITY-ST-ZIP				
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	BOLUSKY, BEN		NAME				
STREET ADDRESS	1533 PARK CENTER DR		STREET ADDRESS				
CITY-ST-ZIP	ORLANDO, FL 32835		CITY-ST-ZIP				
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	BRANCH, MIKE DR.		NAME				
STREET ADDRESS	PO BOX 457		STREET ADDRESS				
CITY-ST-ZIP	PT. ST. JOE, FL 32457		CITY-ST-ZIP				
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	REDDY, RAMESH DR.		NAME				
STREET ADDRESS	PO BOX 110510		STREET ADDRESS				
CITY-ST-ZIP	GAINESVILLE, FL 32611		CITY-ST-ZIP				
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	CHEEK, JIMMY		NAME				
STREET ADDRESS	PO BOX 110270		STREET ADDRESS				
CITY-ST-ZIP	FERNANDINA BEACH, FL 32035		CITY-ST-ZIP				
TITLE	ED	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	JOYCE, JOSEPH C DR		NAME				
STREET ADDRESS	P.O. BOX 110180		STREET ADDRESS				
CITY-ST-ZIP	GAINESVILLE, FL 326110180		CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 fees empowered.							
SIGNATURE: <i>Joseph C Joyce</i> Joseph C Joyce, Executive Director			1/10/07 352-392-1971				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #				

ATTACHMENT

60002116

N47055

UNIVERSITY OF FLORIDA LEADERSHIP AND EDUCATION FOUNDATION, INC. BOARD OF DIRECTORS JULY 2006

President:

Mr. Ben Bolusky [@](6-30-07)
Executive Vice President
Florida Nursery, Growers &
Landscape Association
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407-295-1619 (Fax)
Email: bbolusky@fnga.org

Vice President:

Mr. Dennis Wedgworth [@](6-30-07)
Manager
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561-996-0613 (Fax)
Email: dennis@wedgworth.com

Secretary/Treasurer:

Mr. Mike Branch [@](6-30-07)●
Government Affairs Manager
Smurfit Stone Corp
P O Box 457
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904-277-5824 (Office)
904-277-5743 (Fax)
Email: mbranch@smurfit.com
(Serving a 4th term)

Executive Director:

Dr. Joseph C. Joyce [@]
Exec Assoc Vice President
for Agriculture and Natural
Resources
University of Florida
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Board Members:

Dr. Larry R. Arrington ^{***@}
Dean
IFAS - Dean for Extension
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General Counsel (Sec. - Joyce)
Florida Farm Bureau Federation
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Dr. Jim Cato (6-30-08) ^{***}
Senior Assoc Dean & Dir
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Dean
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Ms. Nancy McDonald (6-30-09) [◆]
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Mr. Bill Messina (6-30-08) ^{***}
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Howard Rutherford (6-30-08)
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727-895-7437 (Office)
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Email: hrutherford@pieraquarium.org

- * University President designee
- ** Board of Trustees designee
- *** UF employee
- [@] Executive Committee member
- ◆ 2nd three-year term
- Re-appointed annually. Can serve up to 5 years maximum.