

FILED
Feb 13, 2008 8:00 am
Secretary of State

02-13-2008 90031 007 ****61.25

**2008 NOT-FOR-PROFIT CORPORATION
 ANNUAL REPORT**

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.		01282008 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number NOT APPLICABLE	
Zip		Country		Applied For Not Applicable	
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.					
SIGNATURE <u>Joseph C Joyce, Executive Director</u> 2/07/08 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		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 NAME STREET ADDRESS CITY - ST - ZIP	D BUTLER, SCOTTIE J P.O. BOX 147030 GAINESVILLE, FL 326147030	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	See attached for additions <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BOLUSKY, BEN 1533 PARK CENTER DR ORLANDO, FL 32835	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BRANCH, MIKE DR. PO BOX 457 PT. ST. JOE, FL 32457	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ED JOYCE, JOSEPH C DR P.O. BOX 110180 GAINESVILLE, FL 326110180	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD McDonald, Nancy 2649 Britt Rd Mount Dora FL 32757 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Wedgworth, Dennis 13643 Staimford Dr Wellington FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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 like empowered.					
SIGNATURE: <u>Joseph C Joyce, Executive Director</u> 2/07/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					
352-392-1971					

ATTACHMENT
400 24302
#N47055

**UNIVERSITY OF FLORIDA
LEADERSHIP AND EDUCATION FOUNDATION, INC.
BOARD OF DIRECTORS
JULY 2007**

President:

Mr. Dennis Wedgworth[®] (6-30-07)
Manager
Wedgworth Farms, Inc.
13643 Staimford Drive
Wellington, FL 33414
561-996-2076 (Office)
561-996-0613 (Fax)
Email: dennis@wedgworth.com

Vice President:

Mr. Mike Branch (6-30-08)[®]
Government Affairs Manager
Smurfit Stone Corp
P O Box 457
Fernandina Beach, FL 32035
904-277-5824 (Office)
904-277-5743 (Fax)
Email: mbranch@smurfit.com

Secretary/Treasurer:

Ms. Nancy McDonald (6-30-09)[®][○]
Owner
NGM Productions, Inc.
2649 Britt Road
Mount Dora, FL 32757
352-383-1557 (Office)
352-383-4478 (Fax)
Email: ngmpro@aol.com

Executive Director:

Dr. Joseph C. Joyce[®]
Exec Assoc Vice President
for Agriculture and Natural
Resources
University of Florida
P O Box 110180
Gainesville, FL 32611-0180
352-392-1971 (Office)
352-392-6932 (Fax)
Email: jcj@ifas.ufl.edu

Board Members:

Dr. Larry R. Arrington^{***} [®]
Dean
IFAS - Dean for Extension
University of Florida
P O Box 110210
Gainesville, FL 32611-0210
352-392-1761, Ext. 228 (Office)
352-846-0458 (Fax)
Email: lra@ifas.ufl.edu

Mr. Scottie J. Butler^{**} [®]
General Counsel (Sec. - Joyce)
Florida Farm Bureau Federation
P O Box 147030
Gainesville, FL 32614-7030
352-378-1321 (Office)
352-374-1501 (Fax)
Email: scottie.butler@ffbf.org

Dr. Jim Cato (6-30-08)^{***}
Senior Assoc Dean & Dir
School of Natural Resource
and Environment
P O Box 110400
Gainesville, FL 32611-0400
352-392-5870 (Office)
352-392-5113 (Fax)
Email: jcato@ifas.ufl.edu

Dr. R. Kirby Barrick^{***} [®]
Dean
College of Agricultural & Life
Sciences
University of Florida
P O Box 110270
Gainesville, FL 32611-0270
352-392-1961 (Office)
352-392-8988 (Fax)
Email: kbarrick@ufl.edu

Mr. Bill Messina (6-30-08)^{***}
Coordinator, Economic Analysis
Food and Resource Economics
1179 McCarty Hall
P O Box 110240
Gainesville, FL 32611-0240
352-392-1826 Ext 308 (Office)
352-846-0988 (Fax)
Email: wamessina@ifas.ufl.edu

Howard Rutherford (6-30-08)[○]
Exec Dir of Pier Aquarium, Inc.
800 2nd Avenue NE
St. Petersburg, FL 33701
727-895-7437 (Office)
727-894-1212 (Fax)
Email: hrutherford@pieraquarium.org

I. Weston Wheeler (6-30-10)[○]
Wheeler & Traviss
PO Box 1396
Winter Haven, FL 33882
863-294-7461

- * University President designee
- ** Board of Trustees designee
- *** UF employee
- [®] Executive Committee member
- ◇ 1st three-year term
- ◆ 2nd three-year term
- Re-appointed annually. Can serve up to 5 years maximum.
- Last of 5 year term in Secretary/Treasurer position.