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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000002582 (3)

1. Corporation Name

TOMORROW'S LEADERS, INC.

Principal Place of Business

100 E. 4TH ST.
AVON PARK FL

Mailing Address

P.O. BOX 25
AVON PARK FL 32825



3. Date Incorporated or Qualified

06/01/1995

3a. Date of Last Report

2. Principal Place of Business

21 100 E. 4th St

2a. Mailing Address

26 P.O. Box 25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Avon Park FL

City & State

28 Avon Park FL

Zip

24 33825

Country

25 Highlands

Zip

29 33825

Country

30 Highlands

9. Name and Address of Current Registered Agent

ROBINSON, LINDA
100 E. 4TH ST.
AVON PARK FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 Linda Robinson - Director

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3-22-96

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

"D" LESTER ROBERTS
1002 S. WALTON AVE
AVON PARK, FL. 33825

TITLE NAME STREET ADDRESS CITY-ST-ZIP

"T" Beatrice B Peterson
400 Delaney Ln.
AVON PARK FL. 33825

TITLE NAME STREET ADDRESS CITY-ST-ZIP

"T" Thomas J. Brown
1407 S. Selph Av.
AVON PARK, FL. 33825

TITLE NAME STREET ADDRESS CITY-ST-ZIP

"T" Jamella Beatwright
303 E. Third St.
AVON PARK, FL. 33825

TITLE NAME STREET ADDRESS CITY-ST-ZIP

"D" Linda Robinson
415 Lakeside Park
AVON PARK, FL. 33825

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D Change Addition

12 NAME Linda Johnson
13 STREET ADDRESS 4429 East Caval Run
14 CITY-ST-ZIP Avon Park, FL. 33825

21 TITLE Change Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

25 CITY-ST-ZIP

31 TITLE Change Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE Change Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE Change Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE Change Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

D Tamika Jones
416 Lakeside Park
Avon Park, FL. 33825

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Linda Robinson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-6-96 (941) 452-6668

Date

Daytime Phone #

CR2E037 (12/95)