

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007193

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: COMMUNITY LEADS AND NEEDS, INC.

## Current Principal Place of Business:

1698 SECOND ST.  
CLERMONT, FL 34711

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 121162  
CLERMONT, FL 34712

## New Mailing Address:

FEI Number: 59-3555099

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROCHE, PAUL  
3862 FALLCREST CIRCLE  
CLERMONT, FL 34711 US

## Name and Address of New Registered Agent:

LIGHTCAP, MARY  
1698 SECOND ST.  
CLERMONT, FL 34711 US

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.

SIGNATURE: MARY LIGHTCAP

04/10/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ROCHE, PAUL  
Address: 3862 FALLCREST CIRCLE  
City-St-Zip: CLERMONT, FL 34711

Title: VPD ( ) Delete  
Name: SHAFTER, JOHN  
Address: 9544 LOUISA WOODS  
City-St-Zip: CLERMONT, FL 34711

Title: P ( ) Delete  
Name: EARLY, BEVERLY  
Address: 15526 ROYAL OAK CT  
City-St-Zip: CLERMONT, FL 34711

Title: TD ( ) Delete  
Name: EARLY, BARBARA  
Address: 844 LAKE AVE  
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete  
Name: EARLY, CAROLE MD  
Address: 12836 LAKESHORE DR  
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete  
Name: SALES, MARY JANE  
Address: 288 SEMINOLE ST  
City-St-Zip: CLERMONT, FL 34711

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CROWDER, PATTI  
Address: 610 S. DIXIE DR.  
City-St-Zip: HOWEY-IN-THE-HILLS, FL 34737

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: LIGHTCAP, MARY  
Address: 1698 SECOND ST.  
City-St-Zip: CLERMONT, FL 34711

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: LIGHTCAP, STEVE  
Address: 1698 SECOND ST.  
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY LIGHTCAP

TD

04/10/2008

Electronic Signature of Signing Officer or Director

Date