2004 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT **Secretary of State** DOCUMENT # N99000001850 03-31-2004 90029 024 ****61.25 1. Entity Name FLORIDA LEADERSHIP FOR CAREER AND TECHNICAL EDUCATION, INC. Principal Place of Business Mailing Address 1220 N PAUL RUSSELL ROAD 1220 N PAUL RUSSELL ROAD 94040227 TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 03262004 Chg-NP CB2E037 (10/03) Applied For 4. FEI Number 59-3568227 City & State City & State Not Applicable Zip Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ETHERIDGE, CHARLES Street Address (P.O. Box Number is Not Acceptable) 5330 BERRYHILL RD MILTON, FL 32570 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2004 Added to Fee 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Detete TITLE PPD TITLE Miller, Terry Change ☐ Addition 12900 Lane Park Road DEVORE, FRED NAME NAME Tavares, FL 32778 500 APPLEYARD RD STREET ADDRESS STREET ADDRESS TALLAHASSEE, FL 32304 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition TITLE Kathie Schmidt MILLER, TERRY A NAME NAME 4204 Okeechobee Road 2001 KURT ST STREET ADORESS Fort Pierce, FL 34947 STREET ADDRESS EUSTIS, FL 32726 CITY-ST-ZIP CITY-ST-ZIP Oelete ☐ Change Addition TITLE TITLE ETHEREDGE, CHARLIE NAME NAME STREET ADDRESS 5330 BERRYHILL ROAD STREET ADDRESS MILTON, FL 32570 CITY-ST-7IP CITY-ST-7IP TITLE SD ☐ Delete TITLE __ Change ■ Addition WILLIS, JUDI NAME NAME STREET ADORESS 23187 MACLELLAN AVENUE STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33980 CTIY-ST-ZIP Delete Addition TITLE ☐ Change HALAF MILLER, TERRY NAME STREET ADDRESS 12900 LANE PARK ROAD STREET ADDRESS TAVARES, FL 32778 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP

12. I 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 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 of trustee anowered 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 a state of the component of the component with an attachment with an attachment with a state of the component with a state o 8501

SIGNATURE:

HARLES

FILED Mar 31, 2004 8:00 am