2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001850

FILED Apr 25, 2007 Secretary of State

Entity Name: FLORIDA LEADERSHIP FOR CAREER AND TECHNICAL EDUCATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1220 N PAUL RUSSELL ROAD TALLAHASSEE, FL 32301 US

Current Mailing Address: New Mailing Address:

1220 N PAUL RUSSELL ROAD TALLAHASSEE, FL 32301 US

FEI Number: 59-3568227 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ETHERIDGE, CHARLES 5330 BERRYHILL RD MILTON, FL 32570 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PPD () Delete
 Title:
 ED (X) Change () Addition

 Name:
 MILLER, TERRY
 Name:
 CARR, MARSAN H

 Address:
 12900 LANE PARK RD.
 Address:
 !220 NORTH PAUL RUSSELL RD.

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 TALLAHASSEE, FL 32301

Title: P () Delete Title: P (X) Change () Addition Name: SCHMIDT, KATHIE Name: BESAW, TOM

Address: 4204 OKEECHOBEE RD. Address: 1220 NORTH PAUL RUSSELL RD City-St-Zip: FORT PIERCE, FL 34947 City-St-Zip: TALLAHASSEE, FL 32301

Title: TD () Delete Title: T (X) Change () Addition Name: ETHEREDGE, CHARLIE Name: ETHEREDGE, CHARLIE

 Address:
 5330 BERRYHILL ROAD
 Address:
 5330 BERRYHILL ROAD

 City-St-Zip:
 MILTON, FL 32570
 City-St-Zip:
 MILTON, FL 32570

Title: SD (X) Delete Title: () Change () Addition

 Name:
 WILLIS, JUDI
 Name:

 Address:
 23187 MACLELLAN AVENUE
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33980
 City-St-Zip:

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: MARSAN H CARR ED 04/25/2007