


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 09, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000002334 1. Entity Name FLORIDA SCHOOL BOARDS EDUCATIONAL LEADERSHIP FOUNDATION, INC.	
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Principal Place of Business 203 S. MONROE ST. TALLAHASSEE, FL 32301	Mailing Address 203 S. MONROE ST. TALLAHASSEE, FL 32301
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DO NOT WRITE IN THIS SPACE



01222005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3570278	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BLANTON, WAYNE DR. 203 S. MONROE ST. TALLAHASSEE, FL 32301	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000222636 02/10/05-80003-021 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GRAHAM, WILLIAM 1429 BETA COURT LAKE CLARKE SHORES, FL 33406
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD SHARPE, BARBARA 1014 S.E. 10TH ST. GAINESVILLE, FL 32601
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BLANTON, WAYNE 203 S. MONROE ST. TALLAHASSEE, FL 32301
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **2-8-05 850 414-2578**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #