

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N99000006469**

1. Entity Name

**LEADER SERVANT INTERNATIONAL, INC.**

Principal Place of Business

**256 PRAIRIE DUNE WAY  
ORLANDO FL 32828**

Mailing Address

**PO BOX 780366  
ORLANDO FL 32828-0366**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**31-1696802**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BANFIELD, THOMAS E  
256 PRAIRIE DUNE WAY  
ORLANDO FL 32828**

Name

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

City

**FL**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
FEE IS \$61.25**9. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PD BANFIELD, THOMAS E 256 PRAIRIE DUNE WAY ORLANDO FL 32828	<input type="checkbox"/>		<input type="checkbox"/>
T DURANT, RICHARD L 5640 DUMBARTON AVE SAN BERNARDINO CA 92404	<input type="checkbox"/>		<input type="checkbox"/>
D BRUEHL, J. ROGER 4742 MANTEO CIRCLE ORLANDO FL 32837	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

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 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: *Thomas E. Banfield***Thomas E. Banfield****04/23/01****(407) 382-7952**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

UBR/BR/03

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90388 028 \*\*\*\*\*61.25



DO NOT WRITE IN THIS SPACE