

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04064

FILED
Jan 04, 2005
Secretary of State

Entity Name: LEGAL ENVIRONMENTAL ASSISTANCE FOUNDATION, INC.

Current Principal Place of Business:

1114 THOMASVILLE RD.
SUITE E
TALLAHASSEE, FL 323036290

New Principal Place of Business:

Current Mailing Address:

1114 THOMASVILLE RD.
SUITE E
TALLAHASSEE, FL 323036290

New Mailing Address:

FEI Number: 63-0776777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUDDER, DAVID
1114 THOMASVILLE RD.
SUITE E
TALLAHASSEE, FL 323036290 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: CAMPBELL, VIVIAN V
Address: 2323 SECOND AVENUE NORTH
City-St-Zip: BIRMINGHAM, AL 35203

Title: V () Delete
Name: VALENCIC, CYNTHIA
Address: 1114 THOMASVILLE RD., SUITE E
City-St-Zip: TALLAHASSEE, FL 323036290

Title: S () Delete
Name: JOHNSON, VICTOR
Address: RT 4 BOX 4307
City-St-Zip: DANIELSVILLE, GA 30633

Title: C () Delete
Name: OTTINGER, RICHARD
Address: 818 THE CRESCENT
City-St-Zip: MAMORONECK, NY 10543

Title: T () Delete
Name: WEBB, ROBERT
Address: 1025 23 ST S
City-St-Zip: BIRMINGHAM, AL 35205

Title: DP () Delete
Name: LUDDER, DAVID
Address: 1114 THOMASVILLE RD., SUITE E
City-St-Zip: TALLAHASSEE, FL 323036290

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: MCCABE, SALLY
Address: 2808 WOOD HOLLOW COURT
City-St-Zip: TALLAHASSEE, FL 32303

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

Title: VC (X) Change () Addition
Name: JOHNSON, VICTOR
Address: RT 4 BOX 4307
City-St-Zip: DANIELSVILLE, GA 30633

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CYNTHIA VALENCIC

VP

01/04/2005

Electronic Signature of Signing Officer or Director

Date