CITY-ST-ZIP

TITLE

FILE	NOW: FILING FEE AF	TER MAY 1ST IS	\$550.00		
COF ANNU	PROFIT RPORATION JAL REPORT 1999	Katherin Secretary			
DOCUMENT # P96000088362				99 100 29 111 5: 64	
1. Corporation Name					
LEADER	SPORTS, INC.			r periode ten inne deute daus deute des	うこ Of Mar about and And and as
	e of Business	Mailing Address		a induinent fall alten Matte Mattel Albeit Albeit Co	ist ihidi ilika ditia dilea dibi ilili
390 NORTH ORANGE AVENUE 390 NORTH ORANGE AVEN SUITE 2600 SUITE 2600			JE		
ORLANDO FL 32801-1642		ORLANDO FL 32801-1642		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
2. Principal P	lace of Business	2a. Mailing Address		10/25/1996 4. FEI Number	Applied For
21	nace of Business	26		59-3446309	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Conticate of Status posited (	Fee Required
City & Stat	e	City & State		6, Election Campaign Financing	<b>\$5.00</b> May Be
Zip	Country		Country	Trust Fund Contribution  8. This corporation owes the current year	Added to Fees
24	25	29	30	Personal Property Tax	₹TYes []No
	9. Name and Address of Current			10. Name and Address of New Registers	ed Agent
` NEA	L, RICHARD E		81 Name		
	NORTH ORANGE AVENUE		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	TE 2600		83		
ORL	ANDO FL 32801-1642				
			84 City	F	L 85 Zip Code
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	and 607.1508, Florida Statute: f Florida Such change was au ons of, Section 607.0505, Flori	s, the above-named corp thorized by the corporati da Statutes.	poration submits this statement for the purpose on's board of directors. Thereby accept the app	of changing its registered pointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registered agent OFFICERS AND		Registered Agent signature require  13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	DP	[] DELETE	11701.6	A STATE OF THE STA	[]Change []Addition
NAME	FRALEY, ROBERT E		12 NAME	100002869	3961 8
STREET ADDRESS	390 NORTH ORANGE AVENUE	<b>#2600</b>	13 STREET ADDRESS	-05/10/99	
CITY-ST-ZIP	ORLANDO FL 32801-1642	[] DELETE	14 CITY-ST-ZIP	****150.00	
TITLE NAME	ARDAN, IVAN N	C'I DECEIE	21 TITLE 22 NAME		["  Change   Addition
STREET ADDRESS	390 N. ORANGE AVENUE SUIT	F 2600	23 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32801		2 4 CiTy-ST-ZiP		
TITLE	VST	[] DELETE	31 TITLE		☐ Change ☐ Addition
NAME	NEAL, RICHARD E		32 NAME		
STREET ADDRESS	390 N ORANGE AVE, STE 2600		3 3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32801	[] DELĒTE	34 CITY-ST-ZIP		C16bass DAdden
TITLE NAME		F 1 DEFE IF	4 1 TITLE 4 2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		☐ DELÉTE	51 TITLE	· · · · · · · · · · · · · · · · · · ·	[] Change
NAME			5 2 NAME		
STREET ADDRESS			53 STREET ADDRESS		

STREET ADDRESS

CITY-ST-ZP

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same tegal 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

61 TITLE

[] DELETE

RICHARD E. NEAL / VST 4-23-99 407-425-4900

[ | Change

[] Addition