## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

## **FILED** Feb 20, 1999 8:00 am Secretary of State

,	1999		DIVISION OF CORPORATIONS			02-20-1999 90159 047 ***150.00	
DOCUI	MENT # S4	0614				·	
1. Corporation WHITNE	Y L <b>EADERSHIP</b> G	ROHP, INC.					
**************************************	LEADEROIN G	1001 ; 1110				ê INDIVINIA DEL KIREN ARENA REMAK FIREN KIREN KIREN ALBEN ALBEN BERÎN BERÎN BERÎN BERÎN BERÎN BERÎN BERÎN BERÎN	11)
Principal Place	of Business		Mailing Address			1 10011010 Itt BIBN 60115 61151 Not 2151 6161 6161 6161 6161 6161	•••
4818 CORONAD			4818 CORONADO PARKWAY				
CAPE CORAL F	L 33904		CAPE CORAL FL 33904			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed	
						03/26/1991	
2. Principal Place of Business			2a. Mailing Address			4. FEI Number Applied For 65-0250432 Not Applied	-
Suite, Apt. #, etc.			Suite, Apt. #, etc.			S8.75 Additiona	
22			27			5. Certificate of Status Desired Fee Required	
City & State			City & State			6. Election Campaign Financing \$5.00 May Be	
23			28	A		Trust Fund Contribution Added to Fees	
Zip				Coun	itry	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒No	
24	9. Name and Addre			<u> </u>		10. Name and Address of New Registered Agent	
				1	81 Name		
BREVOORT, RICHARD					82 Street A	et Address (P.O. Box Number is Not Acceptable)	
4818 CORONADO PARKWAY CAPE CORAL FL 33904							
CAF	E CONAL PL 33304				83		I
				Į.	84 City	FL 85 Zip Code	
11 Dureupot	to the provisions of Sect	ions 607 0902 an	nd 607 1508. Florida Statutes	the ah	ove-named c	comporation submits this statement for the purpose of changing its registere	ed
office or re	egistered agent, or both	in the State of F	lorida. Such change was auti	horized	by the corpor	corporation submits this statement for the purpose of changing its register oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Wash		5 01, 5000001 10 10000, 1 10110	u olala	.00.		
	Signature, typed or printed name	registered agent and		-	Agent signature rec	equired when reinstating) DATE	
12.	STDP	FFICERS AND D	DELETE	13. 1.1 TITU		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
TITLE NAME	WHITNEY, RUSSELI		C) DELETE	1.2 NAA			
STREET ADDRESS	4818 CORONADO I				REET ADDRESS	·	i
CITY-ST-ZIP	CAPE CORAL FL			1	Y-ST-ZIP		
TITLE	VP		☐ DELETE	2.1 TITL	E	. Change Ad	dition
NAME	BREVOORT, RICHA			2.2 NAA	Æ		
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CITY-ST-ZIP	CAPE CORAL FL		☐ DELETE	2. 4 CIT 3.1 TITL	Y-ST-ZIP	Change Ad	dition
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STREET ADDRESS					REET ADDRESS		
CITY-ST-ZIP				3.4. CIT	Y-ST-ZIP		
TITLE			☐ DELETE	4.1 TITL	.E	☐ Change ☐ Ad	dition
NAME				4. 2 NA	ME		
STREET ADDRESS				1	REET ADDRESS	,	
CITY-ST-ZIP			☐ DELETE	4.4 CIT	Y-ST-ZIP	☐ Change ☐ Ad	dition
TITLE NAME			- Dereie	5.1 IIIL		L Change Divi	
STREET ADDRESS					REET ADDRESS		
CITY-ST-ZIP				5.4 CIT	Y-ST-ZIP	· .	
TITLE			☐ DELETE	6.1 TITL	.E	☐ Change ☐ Ad	dition
NAME				6.2 NAA	Æ		,

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 legal effect as if made under oath; that I am an officer or director of the corporation on the receiver or truetee 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 adachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Date

Daytime Phone #