

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000008497

**Entity Name:** LEADERSHIP HENDRY & GLADES COUNTIES, INC.

**Current Principal Place of Business:**

644 S. MAIN STREET  
LABELLE, FL 33935

**Current Mailing Address:**

PO BOX 2518  
LABELLE, FL 33975

**FEI Number:** 20-3355496

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HENDRY COUNTY EDC  
644 S. MAIN STREET  
LABELLE, FL 33975 US

*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

**Officer/Director Detail :**

Title            PRES  
Name            GILLMAN, GREGG A  
Address        644 S. MAIN STREET  
City-State-Zip: LABELLE FL 33935

Title            VP  
Name            MISOTTI, DEBORAH  
Address        1655 PANAMA AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title            SEC  
Name            JOHNSON, SHELLIE  
Address        1227 HOPEDALE DRIVE  
City-State-Zip: FORT MYERS FL 33919

Title            TREA  
Name            JORDAN, SUSAN  
Address        1061 S. NAPLES STREET  
City-State-Zip: LABELLE FL 33935

Title            D  
Name            HAMILTON, KIM  
Address        POB 1760  
City-State-Zip: LABELLE FL 33975

*I hereby 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 all other like empowered.*

**SIGNATURE:** SUSAN B. JORDAN

**TREASURER**

**01/25/2013**

Electronic Signature of Signing Officer/Director Detail

Date