

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24000007829

Entity Name: LEADERSHIP EXPERIENCE INITIATIVE INC.

Current Principal Place of Business:

212 SW HOLLYWOOD BLVD
FT WALTON BEACH, FL 32548

Current Mailing Address:

212 SW HOLLYWOOD BLVD
FT WALTON BEACH, FL 32548 US

FEI Number: 99-3732504

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOOD, TAYLOR
959 WHITFIELD RD
FREEPORT, FL 32439 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 PD
Name HOOD, TAYLOR
Address 959 WHITFIELD RD
City-State-Zip: FREEPORT FL 32439

Title CB
Name CAREY, BOBBY
Address 281 EAST MIRACLE STRIP PKWY
City-State-Zip: MARY ESTHER FL 32569

Title DT
Name BOBO-MILES, PATRICE
Address 238 WATSON DR NW
City-State-Zip: FORT WALTON BEACH FL 32548

Title VP
Name BROADNAX, MARCUS
Address 36 JONQUIL AVE
City-State-Zip: FORT WALTON BEACH FL 32439

Title D
Name BARRON, BROOKE
Address 200 MIRACLE STRIP PKWY UNIT 304
City-State-Zip: FT WALTON BEACH FL 32548

Title S
Name ELMORE, DEBORAH
Address 56 GRAND FLORA WAY
City-State-Zip: SANTA ROSA BEACH FL 32459

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: TAYLOR HOOD

PRESIDENT

04/21/2025

Electronic Signature of Signing Officer/Director Detail

Date