## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42885

Entity Name: LEADERS PREPARATORY SCHOOL, INC.

## **Current Principal Place of Business:**

1021 N GOLDENROD RD ORLANDO, FL 32807

**Current Mailing Address:** 

P O BOX 2209

GOLDENROD, FL 32733 US

FEI Number: 59-3080892 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MUSRI, MUHAMMAD 1089 N GOLDENROD RD ORLANDO, FL 32807 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

**FILED** Feb 24, 2014

**Secretary of State** 

CC7275945587

Officer/Director Detail:

Title PCD Title DIRECTOR

MUSRI, MUHAMMAD Name Name KASU, ABDULATIF 1089 N GOLDENROD ROAD Address 8008 COTE CT Address

City-State-Zip: ORLANDO FL 32836 ORLANDO FL 32807 City-State-Zip:

Title D Title VP, DIRECTOR

Name ASSIM, AMENA Name GIBBS, W. ERNEST PHD Address 2951 LAGOON COVE Address 9574 BENNINGTON CHASE DR.

OVIEDO FL 32765 City-State-Zip: ORLANDO FL 32829 City-State-Zip:

Title Title D

Name ZAMAN, AHMADI B DR. Name MARDINI, WALID Address 412 BARCLAY CT. 1830 STATE ROAD 436 Address

City-State-Zip: ALTAMONTE SPRINGS FL 32701 City-State-Zip: WINTER PARK FL 32792

Title DIRECTOR

AKHTAR, SHAHEDA DR. Name 4564 THORNLEA RD Address City-State-Zip: ORLANDO FL 32817

above, or on an attachment with all other like empowered.

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

02/24/2014 SIGNATURE: MUHAMMAD MUSRI **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date