

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000060129

**Entity Name:** HOSPITALITY LEADERS INC.**Current Principal Place of Business:**830 E LAFAYETTE STREET  
TALLAHASSEE, FL 32301**Current Mailing Address:**830 E LAFAYETTE STREET  
TALLAHASSEE, FL 32301 US**FEI Number:** 84-2619098**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FRIMMEL, JASON  
830 E LAFAYETTE STREET  
TALLAHASSEE, FL 32301 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	PRESIDENT
Name	FRIMMEL, JASON
Address	830 E LAFAYETTE STREET
City-State-Zip:	TALLAHASSEE FL 32301

Title	VP
Name	JACKSON, JONATHAN
Address	5164 HOLLY FERN TRACE
City-State-Zip:	TALLAHASSEE FL 32312

Title	VP
Name	GITHENS, SEAN
Address	9171 OLD CHEMONIE ROAD
City-State-Zip:	TALLAHASSEE FL 32309

Title	VP
Name	FRIMMEL, ROBERT
Address	PO BOX 5842
City-State-Zip:	SARASOTA FL 34277

Title	VP
Name	TOCCI, KIMBERLY
Address	PO BOX 5842
City-State-Zip:	SARASOTA FL 34277

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JASON FRIMMEL

PRESIDENT

04/06/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date