

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F23000006620

Entity Name: LEAD222 UNITED, LTD CORPORATION

Current Principal Place of Business:

2413 W ALGONQUIN RD #143
ALGONQUIN, IL 60102

Current Mailing Address:

2413 W ALGONQUIN RD #143
ALGONQUIN, IL 60102 US

FEI Number: 45-1243350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 P
Name BOSHERS, MICHAEL
Address 2413 W ALGONQUIN RD #143
City-State-Zip: ALGONQUIN IL 60102

Title S
Name HOMA, TIM
Address 2413 W ALGONQUIN RD #143
City-State-Zip: ALGONQUIN IL 60102

Title D
Name THURMAN, CHARLES
Address 2413 W ALGONQUIN RD #143
City-State-Zip: ALGONQUIN IL 60102

Title DIRECTOR
Name STEPHENSON, ANDY
Address 2413 W ALGONQUIN ROAD
City-State-Zip: ALGONQUIN IL 60102

Title S
Name BOSHERS, GLORIA
Address 2413 W ALGONQUIN RD #143
City-State-Zip: ALGONQUIN IL 60102

Title D
Name KEEHN, DAVE
Address 2413 W ALGONQUIN RD #143
City-State-Zip: ALGONQUIN IL 60102

Title D
Name MANNIN, TIM
Address 2413 W ALGONQUIN RD #143
City-State-Zip: ALGONQUIN IL 60102

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: GLORIA BOSHERS

SECRETARY

03/20/2024

Electronic Signature of Signing Officer/Director Detail

Date