2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700373

FILED Apr 19, 2004 Secretary of State

Entity Name: TALLAHASSEE MUSEUM OF HISTORY AND NATURAL SCIENCE, INC.

Current Principal Place of Business: New Principal Place of Business: 3945 MUSEUM DRIVE TALLAHASSEE, FL 32310 **Current Mailing Address: New Mailing Address:** 3945 MUSEUM DRIVE TALLAHASSEE, FL 32310 FEI Number: 59-0838924 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAWS, RUSSELL S 3042 CLOUDLAND DRIVE TALLAHASSEE, FL 32312 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition TORRISI, KAREN Name: Name: 8101 TALLY ANN DRIVE Address: Address: City-St-Zip: TALLAHASSEE, FL 323119492 City-St-Zip: Title: TTR () Delete Title: (X) Change () Addition TTR HUNT, DEBORAH K Name: MOORE, RICHARD Name: Address: 3166 SHAMROCK EAST Address: 211 RHODEN COVE ROAD City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32303 Title: () Delete Title: (X) Change () Addition STILES, WILBUR SUGGS, DEL Name: Name: 3512 TELLIUM COVET 2300 CYPRESS COVE DRIVE Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: TALLAHASSEE, FL 32310 Title: () Delete Title: () Change () Addition Name: DAWS, RUSSELL S Name: 3042 CLOUDLAND DRIVE Address: Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: Title: VΡ () Delete Title: (X) Change () Addition SUGGS, DEL LUNNY, CHRIS Name: Name: 2300 CYPRESS COVE DR 448 STAND TALL COURT Address: Address: TALLAHASSEE, FL 32310 City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32312

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RUSSELL S DAWS CEO 04/19/2004