

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701003

FILED
Apr 27, 2009
Secretary of State

Entity Name: TALL TIMBERS RESEARCH, INC.

Current Principal Place of Business:

13093 HENRY BEADEL DR
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

13093 HENRY BEADEL DR
TALLAHASSEE, FL 32312 US

New Mailing Address:

FEI Number: 59-0952956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, LANE, EXECUTIVE DIRECTOR
13093 HENRY BEADEL DR.
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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:

Title: CD () Delete
Name: PERKINS, DAVE D
Address: 487 RIVER ROAD
City-St-Zip: MANCHESTER CENTER, VT 05255 US

Title: TD () Delete
Name: BARRON, THOMAS A
Address: P. O. BOX 900
City-St-Zip: TALLAHASSEE, FL 32302 US

Title: SD () Delete
Name: WOOD, C. MARTIN III MRS
Address: 676 LIVE OAK LANE
City-St-Zip: MONTICELLO, FL 32344 US

Title: VCD () Delete
Name: WATT, PHILIP C DR
Address: P O BOX 2551
City-St-Zip: THOMASVILLE, GA 31799 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VCD (X) Change () Addition
Name: CORBETT, RICHARD MRS
Address: 1043 GUI SANDO DR
City-St-Zip: TAMPA, FL 33616 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LANE GREEN

Electronic Signature of Signing Officer or Director

CEO

04/27/2009

Date