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Mar 27 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. McRham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 771337 (3)  
1. Corporation Name  
TALLAHASSEE SOCIETY OF ASSOCIATION EXECUTIVES, INC.



Principal Place of Business: 1406 HAYS ST STE 8 TALLAHASSEE FL 32301 US  
Mailing Address: P O BOX 10523 TALLAHASSEE FL 32302-2523 US

3. Date Incorporated or Qualified: 11/18/1983  
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business: 21 502 E Jefferson Street Tallahassee FL 32301  
2a. Mailing Address: 26 PO BOX 1039 Tallahassee FL 32302  
22. City & State: Tallahassee FL  
23. City & State: Tallahassee FL  
24. Zip: 32301 Country: Leon  
25. Zip: 32302 Country: Leon

4. FEI Number: 59-2368120  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent: CHESHIRE, DEBORAH 1406 HAY ST STE 8 TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent: 81 Name: Melanie J Williams  
82 Street Address (P.O. Box Number is Not Acceptable): 502 E Jefferson Street  
84 City: Tallahassee FL 85 Zip Code: 32301

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Melanie J. Williams 3/2/97 DATE: 3/2/97

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	MILLER, MARK	335 BEARD ST	TALLAHASSEE FL	<input checked="" type="checkbox"/>
PP	WRIGHT, WILSON	217 S ADAMS ST	TALLAHASSEE FL	<input checked="" type="checkbox"/>
D	MILSTEAD, JOHN	214 S BRONOUGH ST	TALLAHASSEE FL	<input checked="" type="checkbox"/>
D	JEFF DORAN	402 E JEFFERSON ST	TALLAHASSEE FL	<input checked="" type="checkbox"/>
D	TARA BULL	6515 INTERNATIONAL DR	ORLANDO FL	<input type="checkbox"/>
PE	CRAIG CROSBY	235 E VIRGINIA ST	TALLAHASSEE FL	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
President	Craig Crosby	1705 S. Gadsden	Tallahassee, FL 32301	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Past President	Mark Miller	335 Beard street	Tallahassee FL 32303	<input checked="" type="checkbox"/>	<input type="checkbox"/>
President Elect	Eleanor Warrmack	411 office Plaza Drive	Tallahassee FL 32301	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vice President	Jeff Doran	402 E Jefferson Street	Tallahassee FL 32301	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Treasurer	Donna Nortillo	200 E College Ave	Tallahassee FL 32301	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Secretary	Jan Scheff	502 E Jefferson St	Tallahassee FL 32301	<input checked="" type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Craig Crosby Feb. 5, 1997 DATE: Feb. 5, 1997 904/222-1243  
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)