

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 19, 2001 8:00 am
Secretary of State

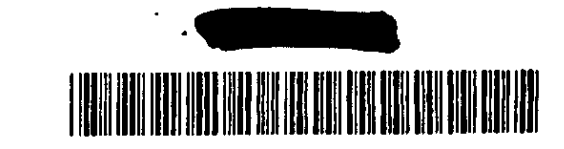
05-04-2001 90044 022 ****61.25

DOCUMENT # 771337

1. Entity Name
TALLAHASSEE SOCIETY OF ASSOCIATION EXECUTIVES, I

Principal Place of Business 231 LAFAYETTE CIRCLE TALLAHASSEE FL 32303 US	Mailing Address P.O. BOX 1139 TALLAHASSEE FL 32302 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2368120	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent TOBIN, SUSAN 231 LAFAYETTE ST TALLAHASSEE FL 32303	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NORTILLO, DONNA 200 E. COLLEGE AVE TALLAHASSEE FL 32302 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ricki Braswell - Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1520 Metropolitan Blvd. Tallahassee, FL 32308 D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BODKIN, LARRY 335 BEARD ST TALLAHASSEE FL 32303 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Thomas Kerr - Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition P.O. Box 1117 Tallahassee, FL 32302 D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD - Immediate Past President <input checked="" type="checkbox"/> Delete BARTON, GLEN 2909 ROBERTS AVE TALLAHASSEE FL 32301	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Linda Brainerd - VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4639 Autumn Woods Way Tallahassee, FL 32303 D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP - President <input type="checkbox"/> Delete SCHEFF, JAN 225 UNIVERSITY CTR., #C3100 TALLAHASSEE FL 32308-2660	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sandy Stevens - Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3462 Saltash Lane Tallahassee, FL 32311 D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPD <input checked="" type="checkbox"/> Delete WARMACK, ELEANOR 411 OFFICE PLAZA DR. TALLAHASSEE FL 32301	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Linda Brainerd <input type="checkbox"/> Change <input type="checkbox"/> Addition 4639 Autumn Woods Way Tallahassee FL 32303 D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SB - President Elect <input type="checkbox"/> Delete NAPIER, BENNETT 4500 SHANNON LAKES PLAZA #1-108 TALLAHASSEE FL 32308	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE OF REGISTERED AGENT 4/23/01 855/561-6124
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)