2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 26, 2004 8:00 am Secretary of State

DOCUMENT # N07542 1. Entity Name THE CAMELLIA AND GARDEN CLUB OF TALLAHASSEE, FLORIDA, INC.									04-26-20	04 9049	7 012 ***	*61.25
Principal Ptac P.O. BOX 20 P.O. BOX 201 TALLAHASSE	₩ 3030 - E, FL 3230 323	Mailing Address -P.O. BOX 201- 8030 BERNARD ST. PO 80X 201- TALLAHASSEE, FL-32302 US 32317										
2. Principal P	BER,	3. Mailing Address 8030 BERNARD STREET					! 193 1 93		18 141 141 141			
Suite, Apt.		Suite, Apt. #, etc.				01272004	Chg-NP	CR2E0	37 (10/03)			
	HASS	TALLAHASSEE, FL				4. FEI Number 59-25006	17			plied For t Applicable		
323	32317 · LEOU					Country Less		6. Certificate of	Status Desired		\$8.75 Add Fee Require	
MAPHIS, (1996 CHAI TALLAHAS		7. Name and Address of New Registered Agent Name STEWART A. TOMINSON Street Address (P.O. Box Number is Not Acceptable) 701										
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tibe if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
Filing Fee is \$61.25 Due by May 1, 2004 9. Election Campaign Trust Fund Contrib								\$5.00 May Be Added to Fees			k payable to riment of Si	
10.	PD	OFFICERS AND DIF	ECTORS				,	ADDITIONS/CHAN	GES TO OFFIC	ERS AND D		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Delete NORTHCUTT, ED 3013 BROOKMONT DRIVE TALLAHASSEE, FL 32312					E E EET ADDRESS '-ST-ZIP	☐ Change				Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TOMLINSON, STEWART 701 TYTY ROAD TALLAHASSEE, FL 32308					E E ET ADDRESS -ST-ZIP		NP Change B WEIMER, KAREN 1503 HICKORY AUENUE TALLAHABSEE, FL 32303				Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Delete RHODES, HOWARD L 7011 BUCK LANE ROAD TALLAHASSEE, FL 32317					E E ET ADDRESS -ST-ZIP	PD RAN 1990	PD RANDOLPH MAPHIS 196 CHARLAIS STREET ALLAHASSES, FL 32317				
TITLE Name Street address City-St-Zip	P (I Delete MAPHIS, CARL R 1996 CHARLAIS STREET TALLAHASSEE, FL 32317					E EET ADORESS -ST-ZIP	Р 5721 701	WART TOM. 1 TYTY RE	LINSON OAD	3230	□ Change	Addition
TITLE NAME STREET ADDRESS CTTY-ST-ZIP	T Delete LAWRENCE, GAYLE 8030 BERNARD STREET TALLAHASSEE, FL 32317					E E ET ADDRESS -ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Delde RHODES, MARY 7011 BUCK LAKE RD TALLAHASSEE, FL 32317					e Eet address -st-zip					☐ Change	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: SIGNATURE:												
SIGITAL	one: _	SIGNATURE AND TYPES ON P	WINTED NAME	OF SIGNING OFFICER O	A DIREC			· OUINNER	Date //	, _ , _ ,	Daytime Phone #	