

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07542

FILED
Jan 30, 2009
Secretary of State

Entity Name: THE CAMELLIA AND GARDEN CLUB OF TALLAHASSEE, FLORIDA, INC.

Current Principal Place of Business:

8030 BERNARD ST.
TALLAHASSEE, FL 32317 US

New Principal Place of Business:

Current Mailing Address:

8030 BERNARD ST.
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-2500617 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE, GAYLE J
8030 BERNARD STREET
TALLAHASSEE, FL 32317 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: D () Delete
Name: HIGHTOWER, BILL
Address: 9201 CARR LANE WAY
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP () Delete
Name: COPPINS, PEGGY
Address: 2888 HANNON HILL DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: P () Delete
Name: MAPHIS, RANDOLPH
Address: 7476 SKIPPER LANE
City-St-Zip: TALLAHASSEE, FL 32317

Title: PD () Delete
Name: TOMLINSON, STEWART
Address: 701 TYTY ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: T () Delete
Name: LAWRENCE, GAYLE
Address: 8030 BERNARD STREET
City-St-Zip: TALLAHASSEE, FL 32317

Title: S () Delete
Name: RHODES, MARY
Address: 7011 BUCK LAKE RD
City-St-Zip: TALLAHASSEE, FL 32317

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

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

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

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: GAYLE J. LAWRENCE

Electronic Signature of Signing Officer or Director

T

01/30/2009

Date