FILE NOW: FILING FEE IS \$61.25

Mailing Address

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

SIGNATURE:

N96000004745 (3) DOCUMENT #

TALLAHASSEE AREA CHAPTER OF THE NATIONAL INSTITU TE OF GOVERNMENTAL PURCHASING INC.

PO BOX 922 PO BOX 922 TALLAHASSEE FL 32302 TALLAHASSEE FL 32302-0922 3. Date Incorporated or Qualified 09/12/1996 3a. Date of Last Report FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 53-0196623 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Ζip Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes
 This corporation has liability for intangible tax under s. 199.032, Florida Statutes Zip 24 25 29 30 Florida Statutes Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MIXON, RHONDA M 82 Stre 3645 KILLARNEY PLAZA DR 83 TALLAHASSEE FL 32308 84 City 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-name office or registered agent, or both, in the State of Florida. Such change was authorized by the cagent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and life if applicable. (NOTE: Registered Agent signs 12. OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE MIXON, RHONDA M NAME 1.2 NAME 3645 KILLARNEY PLAZA DR STREET ADDRESS 1.3 STREET ADDRES TALLAHASSEE FL 32308 CITY-ST-7IP 1.4 CITY-ST-ZIP ☐ DELETE TITLE 2.1 TITLE NAME ALCORN, GWEN MS. 2.2 NAME 2640 NEZ PERCE TRL STREET ADDRESS 2.3 STREET ADDRES TALLAHASSEE FL 32303 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE BARKER, H P JR NAME 3.2 NAME 307 HOFTMAN DRIVE STREET ADDRESS 3.3 STREET ADDRES TALLAHASSEE FL 32312 DITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE NAME WILDER, RALPH B 4. 2 NAME 2223 BELLEVUE WAY STREET ADDRESS 4.3 STREET ADDRES TALLAHASSEE FL 32304 CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Russ Rothman NAME 5.2 NAME Rt. 2, Box 392-A 5.3 STREET ADDRES STREET ADDRESS Tallahassee, FL 32311 997-3098 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE NAME Arthur E. Wright 6.2 NAME STREET ADDRESS 6.3 STREET ADDRES 1649 Copperfield Cir.

FILED Feb 27 1997 8:00am



Secretary of State

3645 KILLARNEY PLAZA DR TALLAHASSEE FL 32308			82 Street Address (P.O. Box Number is Not Acceptable)	
				1 1 1 1
		84	City	FL 85 Zip Code
office or r	to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the egistered agent, or both, in the State of Florida. Such change was authorize in familiar with, and accept the obligations of, Section 617.0503, Florida Sta	ed be	v the con	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
NATURE .				
			ent signature	e required when reinstating) DATE
··-···································	OFFICERS AND DIRECTORS 13 P DELETE 11	TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
:	•			Karen Esser
t		NAME		5594 Pedrick Plantation Circle Tallahassee, FL 32311 877-9715
E1 ADDRESS	¥ - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	STAEET	ADDRESS	Tallahassee, FL 32311 877-9715
- ST - 7)P			ST-ZIP	Tarranassee, FL 32311 0/7-9/13
į.		TITLE		C Online C AL Addition (-
E		NAME		Jim Ellis
		STREET	ADDRESS	335 7th Ave., SE
ST-ZIP	TALLAHASSEE FL 32303 2.4		ST-ZIP	Cairo, GA 31728 912/377-3925
	**************************************	TITLE	'	VGwen Parker ⊠ Change ☐ Addition
E		NAME		3055 Thomas Rd.
FT ADDRESS	+	STREE	ADDRESS	Tallahassee, FL 32312
- ST - ZIP	TALLAHASSEE FL 32312 3.4	CITY-	ST-ZIP	904/385-2662
	T DELETE 4.1	TITLE		Change & Addition
E	WILDER, RALPH B 4.2	NAME		John Knight
E1 ADDRESS	2223 BELLEVUE WAY 4.3	STREET	ADDRESS	8158 Chris Ln.
- \$1 - Z (P	TALLAHASSEE FL 32304	CITY-S	ST-ZIP	Tallahassee, FL 32310-0781 421-5563
:	D DELETE 5.1	TITLE		D Change K Addition
ıE	Russ Rothman 5.2	NAME		Rebecca Bacot
ET ADDRESS	Rt. 2, Box 392-A	STREET	ADDRESS	71 Passion Flower Rd.
-SI-7IP	Tallahassee, FL 32311 997-3098 54	CITY-5	ST - ZIP	Crawfordville, FL 32327 926-2752
		TITLE		Change Addition
ε	Arthur E. Wright 62	NAME		
ET ADDRESS		STREE	ADDRESS	
- \$T - ZIP	Tallahassaa FI 32312 803_7662 64			
I do herek informatio I am an o appears i	by certify that the information supplied with this filing does not qualify for the indicated on this angular report or supplemental annual report is true and thicer or director of the corporation or the receiver or trustee empowered to a Block 12 or Block 13 if chartery, or only a attachmont with an address.	B BX6 BCC BX66	emption a urate and cute this	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the did that my signature shall have the same legal effect as if made under oath; that report as required by Chapter 617, Florida Statutes; and that my name
GNATURE: 0511 MVDD 2-15-97 487-8521				