2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005840

Entity Names THE TALL ALIASSEE TRAILER AZERS INC.

FILED May 01, 2004 Secretary of State

Entity Nai	me: THE TALI	LAHASSEE IRAILBLAZERSI	NC.			
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
	ITREE LANE SSEE, FL 3231	11		9755 WYNTREE LANE TALLAHASSEE, FL 32317		
Current M	lailing Addres	s:	New Maili	New Mailing Address:		
	ITREE LANE SSEE, FL 3231	11		9755 WYNTREE LANE TALLAHASSEE, FL 32317		
FEI Number:	: 59-3537848	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	I Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
	TERESA ITREE LANE SSEE, FL 3231	I1 US	9755 WYŃ	SANCHO, TERESA 9755 WYNTREE LANE TALLAHASSEE, FL 32317 US		
	named entity see of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE:			05/01/2004		
	Electron	ic Signature of Registered Age	ent		Date	
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () SANCHO, TERE 9755 WYNTREI TALLAHASSEE	E LANE	Title: Name: Address: City-St-Zip:	(()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD (X) WOZNIAK, MEC 9601 MICCUSU TALLAHASSEE	KEE ROAD	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () CLARK, JANICE 2648 AUGUSTII TALLAHASSEE	NE CREEK TR	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	S () GURLEY, ANITA 195 WHETHEB TALLAHASSEE	INE WAY W	Title: Name: Address: City-St-Zip:	GURLEY, AN 2664 PINENC		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TERESA R. SANCHO PD 05/01/2004