

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005840

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: THE TALLAHASSEE TRAILBLAZERS INC.

**Current Principal Place of Business:**

9755 WYNTREE LANE  
TALLAHASSEE, FL 32317

**New Principal Place of Business:**

**Current Mailing Address:**

9755 WYNTREE LANE  
TALLAHASSEE, FL 32317

**New Mailing Address:**

FEI Number: 59-3537848

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANCHO, TERESA R  
9755 WYNTREE LANE  
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: PD ( ) Delete  
Name: SANCHO, TERESA R  
Address: 9755 WYNTREE LANE  
City-St-Zip: TALLAHASSEE, FL 32317

Title: TD ( ) Delete  
Name: CLARK, JANICE  
Address: 2590 AUGUSTINE CREEK TR  
City-St-Zip: TALLAHASSEE, FL 32311

Title: VPD ( ) Delete  
Name: GURLEY, ANITA  
Address: 2664 PINENOLL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32305

Title: S ( ) Delete  
Name: CORBETT, JAYE M  
Address: 2470 SUNBURST PLACE  
City-St-Zip: TALLAHASSEE, FL 32301

**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:

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: TERESA R. SANCHO

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date