

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000009777

Entity Name: TALLAHASSEE ASSOCIATION OF GOVERNMENT
ACCOUNTANTS, INC.**FILED**
Jan 26, 2022
Secretary of State
3930545813CC**Current Principal Place of Business:**1844 RODEO DRIVE
TALLAHASSEE, FL 32311**Current Mailing Address:**COLLEGE AVENUE STATION
PO BOX 1335
TALLAHASSEE, FL 32302 US**FEI Number: 59-3754778****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MANNING, PATRICIA MILLER DBA
COLLEGE AVENUE STATION
PO BOX 1335
TALLAHASSEE, FL 32302 US*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: PATRICIA MILLER MANNING****01/26/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRESIDENT
Name MANNING, PATRICIA MILLER DBA
Address 1844 RODEO DRIVE
City-State-Zip: TALLAHASSEE FL 32311**Title** TREASURER ELECT
Name MURPHY, ANTONIO
Address 2500 MERCHANTS ROW BLVD
APT. 184
City-State-Zip: TALLAHASSEE FL 32311**Title** SECRETARY
Name RAY, PAMELA CPA
Address 216 OMEGA DRIVE
City-State-Zip: MONTICELLO FL 32344**Title** PRESIDENT-ELECT
Name HODGE, TRACIE
Address COLLEGE AVENUE STATION
PO BOX 1335
City-State-Zip: TALLAHASSEE FL 32302**Title** TREASURER
Name WALKER, PETER CPA
Address A6300 UNIVERSITY CENTER
282 CHAMPIONS WAY
City-State-Zip: TALLAHASSEE FL 32306**Title** PAST-PRESIDENT
Name RAY, PAMELA CPA
Address 216 OMEGA DRIVE
City-State-Zip: MONTICELLO FL 32344

I hereby 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 all other like empowered.

SIGNATURE: DR. PATRICIA MANNING**PRESIDENT****01/26/2022**

Electronic Signature of Signing Officer/Director Detail

Date