

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N29754

**FILED**  
**Feb 15, 2018**  
**Secretary of State**  
**CC2146411170**

**Entity Name:** AIA TALLAHASSEE, INC.

**Current Principal Place of Business:**

1422 SEMINOLE DRIVE  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

1422 SEMINOLE DRIVE  
TALLAHASSEE, FL 32301 US

**FEI Number:** 59-2299347

**Certificate of Status Desired:** No

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

WILLIAMS, EVE C  
1422 SEMINOLE DRIVE  
TALLAHASSEE, FL 32301 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:** EVE C WILLIAMS

02/15/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PAST PRESIDENT  
Name STARK, JAMES M  
Address 1350 MARKET STREET #209  
City-State-Zip: TALLAHASSEE FL 32312

Title TREASURER  
Name TSUJIMURA, MIYUKI  
Address 1350 MARKET ST  
209  
City-State-Zip: TALLAHASSEE FL 32312

Title PRESIDENT  
Name WILLIAMS, EVE  
Address 1422 SEMINOLE DR.  
City-State-Zip: TALLAHASSEE FL 32301

Title VP  
Name HAMMOND, RHONDA  
Address 2627 BLAIR STONE RD  
City-State-Zip: TALLAHASSEE FL 32301

Title SECRETARY  
Name NASAB, MAXIM  
Address 6713 APOLLO TRAIL  
City-State-Zip: TALLAHASSEE FL 32309

Title ASSOCIATE DIRECTOR  
Name GALLARDO-RUNK, ANDREA  
Address 1960-C BUFORD BLVD.  
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR OF COMMUNICATIONS  
Name JOHNSON, GEORGE  
Address 3494 MARTIN HURST RD.  
B  
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR OF ADVOCACY  
Name WINGER, JEHNA  
Address 1213 MICCOSUKEE RD.  
City-State-Zip: TALLAHASSEE FL 32308

*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:** EVE C WILLIAMS

**PRESIDENT**

02/15/2018

Electronic Signature of Signing Officer/Director Detail

Date