

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34079

Entity Name: NAMI TALLAHASSEE, INC.

Current Principal Place of Business:

%FAYE L. BARNETTE
2024 DOOMAR DRIVE
TALLAHASSEE, FL 32308

Current Mailing Address:

%FAYE L. BARNETTE
2024 DOOMAR DRIVE
TALLAHASSEE, FL 32308

FEI Number: 59-2967900

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARNETTE, FAYE L.
2024 DOOMAR DRIVE
TALLAHASSEE, FL 32308 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SD
Name SLADE, MARSHA
Address 1340 TERRACE ST.
City-State-Zip: TALLAHASSEE FL 32303

Title TD
Name BARNETTE, BOB
Address 2024 DOOMAR DR..
City-State-Zip: TALLAHASSEE FL 32308

Title 1ST VPD
Name FOSTER, CINDY
Address 133 OAK ST.
UNIT 22
City-State-Zip: TALLAHASSEE FL 32301

Title 2ND VPD
Name BARBER, DENISE
Address 2813 MISTY GARDEN CIRCLE
City-State-Zip: TALLAHASSEE FL 32303

Title PD
Name STEPHENS, PATRICIA
Address 3548 TRILLIUM CT.
City-State-Zip: TALLAHASSEE FL 32312

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: BOB BARNETTE

TREASURER

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date