2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34079

Entity Name: NAMI TALLAHASSEE, INC.

Current Principal Place of Business:

C/O PATRICIA W. BROWN 3504 SHARER RD TALLAHASSEE, FL 32312 FILED
Jan 25, 2021
Secretary of State
5115992637CC

Current Mailing Address:

P O BOX 14842

TALLAHASSEE, FL 32317 US

FEI Number: 59-2967900 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, PATRICIA W 3504 SHARER RD TALLAHASSEE, FL 32312 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 W. BROWN 01/25/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title EXECUTIVE DIRECTOR Title TREASURER

Name O'FARRELL, NANCY Name BROWN, PATRICIA W
Address 3020 GODFREY PL Address 3504 SHARER RD

City-State-Zip: TALLAHASSEE FL 32309 City-State-Zip: TALLAHASSEE FL 32312

Title PRESIDENT Title VP, 1ST

NameCRAMER, KARENNameCASTLE, WALTERAddress202 BAXTER COURTAddress1840 FIDDLER COURT

City-State-Zip: TALLAHASSEE FL 32312 City-State-Zip: TALLAHASSEE FL 32308-4450

Title VP, 2ND Title SECRETARY
Name CARTER, REBECCA Name BARBEE, SHEILA

Address 2004 HIGH RD Address 3353 AQUA RIDGE WAY

City-State-Zip: TALLAHASSEE FL 32303 City-State-Zip: TALLAHASSEE FL 32309

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: PATRICIA BROWN

TREASURER 01/25/2021

Date