

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40053

Entity Name: THE TALLAHASSEE SCIENTIFIC SOCIETY, INCORPORATED**Current Principal Place of Business:**1045 LONGSTREET DR
TALLAHASSEE, FL 32311**Current Mailing Address:**PO BOX 1163
TALLAHASSEE, FL 32302 US**FEI Number:** 59-3128863**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ZIMMERMAN, CAROL O
1045 LONGSTREET DR
TALLAHASSEE, FL 32311 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:** CAROL O ZIMMERMAN

04/05/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name ZIMMERMAN, CAROL
Address 1045 LONGSTREET DR.
City-State-Zip: TALLAHASSEE FL 32311

Title DIRECTOR
Name BOERNER, BARRY
Address 6245 JORDANS PASS DRIVE
City-State-Zip: TALLAHASSEE FL 32304

Title PRESIDENT
Name MADDOX, KERRY
Address 2058 W FOREST DR
City-State-Zip: TALLAHASSEE FL 32303

Title VP
Name HARVEY, CHRIS
Address 1917 DOOMAR DR
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name GABOARDI CALHOUN, MABRY
Address 1841 LAKESHORE LANE
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name RICE, DEMETRIUS
Address 800 OCALA ROAD 300-232
City-State-Zip: TALLAHASSEE FL 32304

Title DIRECTOR
Name STEPHENSON, ADRIENNE
Address 165 LOCKE ST #C
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name DAVIDSON, SHANNON
Address 1735 AUGUSTINE PLACE
City-State-Zip: TALLAHASSEE FL 32301

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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: CAROL O ZIMMERMAN

TREASURER

04/05/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BREMER, MARTIN
Address 1419 GREEN ST
City-State-Zip: TALLAHASSEE FL 32303

Title SECRETARY
Name MADDOX, AMELIA
Address 2058 W. FOREST DR
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name KNIGHT, WALLACE
Address 482 TEAL LANE
City-State-Zip: TALLAHASSEE FL 32308