

2024 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

02/07/2024

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 1041 BROWNING DR
City-State-Zip: TALLAHASSEE FL 32308

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

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

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

Title DIRECTOR
Name MADDOX, AMELIA
Address 165 BRIGHAM LOOP
City-State-Zip: TROUTMAN NC 28166

Title SECRETARY
Name TRAVIS, KATHRYN
Address 1325 BRANCH ST.
City-State-Zip: TALLAHASSEE FL 32303

Continues on page 2

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

02/07/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name VINSON, SUSAN
Address 4598 RAMSGATE DR.
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name BEVIS, TODD
Address 1140 MARCH ROAD
City-State-Zip: TALLAHASSEE FL 32311

Title DIRECTOR
Name WHYMS, CHARLISA
Address 5100 BLOUNTSTOWN HIGHWAY
UNIT 123
City-State-Zip: TALLAHASSEE FL 32304