

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51064

Entity Name: CAPITAL CITY ROWING, INC.

Current Principal Place of Business:

7866 MCCLURE DRIVE
TALLAHASSEE, FL 32312

Current Mailing Address:

PO BOX 38154
TALLAHASSEE, FL 32315

FEI Number: 59-3222198

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALKER, KIMBERLY A
7866 MCCLURE DRIVE
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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name STONER, MAUREEN
Address 2965 ST. STEVENS DRIVE
City-State-Zip: TALLAHASSEE FL 32312

Title PRESIDENT
Name WALKER, KIM
Address 7866 MCCLURE DRIVE
City-State-Zip: TALLAHASSEE FL 32312

Title VP
Name TOWNSEND, AYESHA
Address PO BOX 38154
City-State-Zip: TALLAHASSEE FL 32315

Title TREASURER
Name WATSON, JAMES A
Address PO BOX 38154
City-State-Zip: TALLAHASSEE FL 32315

Title VP
Name SEIBERT, JEANNA
Address PO BOX 38154
City-State-Zip: TALLAHASSEE FL 32315

Title SECRETARY
Name OROPALLO, DIANNA
Address PO BOX 38154
City-State-Zip: TALLAHASSEE FL 32315

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: JAMES A WATSON

TREASURER

04/24/2013

Electronic Signature of Signing Officer/Director Detail

Date