

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000005145

**FILED**  
**Feb 01, 2018**  
**Secretary of State**  
**CC7147615257**

**Entity Name:** TALLAHASSEE LENDERS' CONSORTIUM, INC.

**Current Principal Place of Business:**

224 OFFICE PLAZA  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

224 OFFICE PLAZA  
TALLAHASSEE, FL 32301 US

**FEI Number: 59-3212709**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

LANE, LIBBY  
224 OFFICE PLAZA  
TALLAHASSEE, FL 32301 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 VP  
Name BAGGETT, BRIAN  
Address 1400 E. PARK AVE  
City-State-Zip: TALLAHASSEE FL 32301

Title SECRETARY  
Name FORD, TORREY  
Address 7914 MCCLURE DRIVE  
City-State-Zip: TALLAHASSEE FL 32312

Title PRESIDENT  
Name HENRY, KARLUS  
Address 3121 PONTIAC DRIVE  
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR  
Name BELLAMY, JIM  
Address 224 OFFICE PLAZA  
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR  
Name LANE, GREGORY  
Address 1622 EAGLES WATCH WAY  
City-State-Zip: TALLAHASSEE FL

Title DIRECTOR  
Name WILLIAMS, ALAN  
Address 1201 STONY CREEK WAY SUITE 300  
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR  
Name EDWARDS, , TALETHIA  
Address 1802 SAXON SHEET  
City-State-Zip: TALLAHASSEE FL 32310

Title TREASURER  
Name KANE, JACK  
Address 2721 CAPITAL CIRCLE N.E.  
City-State-Zip: TALLAHASSEE FL 32308

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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: KARLUS HENRY**

**PRESIDENT**

**02/01/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GRAY, KANEAKA  
Address 4057 REMER COURT  
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR  
Name RICHARDSON, CURTIS  
Address 533 TUSKEGEE STREET  
City-State-Zip: TALLAHASSEE FL 32305

Title DIRECTOR  
Name HAWKINS, BRENDA  
Address 224 OFFICE PLAZA  
City-State-Zip: TALLAHASSEE FL 32301