2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 322575

Entity Name: FOOD SERVICE OF TALLAHASSEE, INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

107 E THARPE ST 1018 THOMASVILLE ROAD

TALLAHASSEE, FL 32303 US SUITE 200B

TALLAHASSEE, FL 32303 US

Current Mailing Address: New Mailing Address:

FOOD SERVICE OF TALLAHASSEE INC PO BOX 4089 TALLAHASSEE, FL 323154089 US

FEI Number: 59-1200265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HILL, JAMES H JR

107 E. THARPE ST.

TALLAHASSEE, FL 32303 US

HILL, JAMES H JR

1018 THOMASVILLE ROAD

SUITE 200B

ALLAHASSEE, FL 32303 US SUITE 2008
TALLAHASSEE, FL 32303 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: 04/20/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name:HILL, JAMES H JRName:HILL, JAMES H JRAddress:107 E THARPE STAddress:1018 THOMASVILLE ROAD SUITE 200B

City-St-Zip: TALLAHASSEE, FL 32303 US City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: HILL, KAREN R Name: HILL, KAREN R

Address: 107 E THARPE ST Address: 1018 THOMASVILLE ROAD SUTIE 200B

City-St-Zip: TALLAHASSEE, FL 32303 US City-St-Zip: TALLAHASSEE, FL 32303 US

Title: TS () Delete Title: TS (X) Change () Addition

Name: SMITH, RICHARD F Name: SMITH, RICHARD F

Address: 107 E THARPE ST Address: 1018 THOMASVILLE ROAD SUITE 200B

City-St-Zip: TALLAHASSEE, FL 32303 US City-St-Zip: TALLAHASSEE, FL 32303 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD F. SMITH TS 04/20/2009