

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700373

FILED
May 28, 2008
Secretary of State

Entity Name: TALLAHASSEE MUSEUM OF HISTORY AND NATURAL SCIENCE, INC.

Current Principal Place of Business:

3945 MUSEUM DRIVE
TALLAHASSEE, FL 32310

New Principal Place of Business:

Current Mailing Address:

3945 MUSEUM DRIVE
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 59-0838924 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DAWS, RUSSELL S
3042 CLOUDLAND 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

OFFICERS AND DIRECTORS:

Title: STR () Delete
Name: BLACK, KRISTEN
Address: 545 RIVER BIRCH RD
City-St-Zip: MIDWAY, FL 32343

Title: TTR () Delete
Name: RUPP, MIKE
Address: 602 MCDANIEL STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: P () Delete
Name: LUNNY, CHRIS
Address: 301 SOUTH BROUNOUGH STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: DAWS, RUSSELL S
Address: 3042 CLOUDLAND DRIVE
City-St-Zip: TALLAHASSEE, FL

Title: VP () Delete
Name: BALDINO, SUSAN
Address: 2602 LOTUS DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BLACK, KRISTEN
Address: 545 RIVER BIRCH RD
City-St-Zip: MIDWAY, FL 32343

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: CLEMENTS, AMANDA
Address: 317 W NINTH AVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: BALDINO, SUSAN
Address: 2602 LOTUS DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUSSELL S. DAWS

DIR

05/28/2008

Electronic Signature of Signing Officer or Director

Date