2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#711684

FILED Apr 25, 2005 Secretary of State

Entity Name: TALLAHASSEE CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business: 100 NORTH DUVAL STREET TALLAHASSEE, FL 32301 **Current Mailing Address: New Mailing Address:** P.O. BOX 1639 TALLAHASSEE, FL 32302 US FEI Number: 59-0474165 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: DICK, SUZANNE M 100 N DUVAL ST 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DC (X) Change () Addition () Delete WAHLEN, JEFF WAHLEN, JEFF Name: Name: P. O. BOX 391 Address: P. O. BOX 391 Address: City-St-Zip: TALLAHASSEE, FL 32302 City-St-Zip: TALLAHASSEE, FL 32302 Title: DP Title: () Delete () Change () Addition DICK, SUZANNE M Name: Name: Address: 100 N DUVAL ST Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: Title: () Delete Title: (X) Change () Addition GIUDICE, BILL GIUDICE, BILL Name: Name: 1300 MICCOSUKEE ROAD Address: Address: 1300 MICCOSUKEE ROAD City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308 Title: () Delete Title: (X) Change () Addition Name: WILLIAMS, KIM Name: HANNA, RANDALL 201 S. MONROE STREET Address: P. O. BOX 2068 Address: City-St-Zip: TALLAHASSEE, FL 32316 City-St-Zip: TALLAHASSEE, FL 32301 Title: () Delete Title: (X) Change () Addition ENNIS, ERIN ENNIS, ERIN Name: Name: 1400 OVEN PARK DRIVE 1400 OVEN PARK DRIVE Address: Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308 Title: () Delete Title: () Change (X) Addition HUNT. JAMES Name: Name: Address: Address: 3166 SHAMROCK EAST TALLAHASSEE, FL 32308 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUZANNE M. DICK DP 04/25/2005