

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716796

FILED
Feb 10, 2009
Secretary of State

Entity Name: THE TALLAHASSEE URBAN LEAGUE, INCORPORATED

Current Principal Place of Business:

923 OLD BAINBRIDGE ROAD
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

923 OLD BAINBRIDGE ROAD
TALLAHASSEE, FL 32303 US

New Mailing Address:

FEI Number: 59-1346143 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FERRELL, ERNEST
1116 TANNER DR
TALLAHASSEE, FL 32310 US

Name and Address of New Registered Agent:

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: VD () Delete
Name: LEWIS-BUTLER, MAGGIE B
Address: 419 MERCURY DR
City-St-Zip: TALLAHASSEE, FL 32305

Title: D () Delete
Name: BROWN, THOMAS
Address: 1102 E TENNESSEE STREET
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: S () Delete
Name: JONES, MARGARET
Address: 417 GAITHER DRIVE
City-St-Zip: TALLAHASSEE, FL 32305 US

Title: T () Delete
Name: BROWN, SHERWOOD
Address: 1201 N. MONROE ST., SUITE C
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: P () Delete
Name: FERRELL, ERNEST
Address: 1116 TANNER DR.
City-St-Zip: TALLAHASSEE, FL 32310 US

Title: VP () Delete
Name: GAY, LESLIE
Address: 1320 ELBERTA DR
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: THOMAS BROWN

ATTY

02/10/2009

Electronic Signature of Signing Officer or Director

Date