

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2005 8:00 am
Secretary of State

03-08-2005 90179 023 ****61.25

DOCUMENT # 721299 1. Entity Name CIVITAN CLUB OF TALLAHASSEE, INC.					
Principal Place of Business 7440 SKIPPER LANE TALLAHASSEE, FL 32317 US			Mailing Address 7440 SKIPPER LANE TALLAHASSEE, FL 32317 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		02142005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 59-6144252	
5. Certificate of Status Desired ☐		Applied For ☐ Not Applicable			
6. Name and Address of Current Registered Agent LEONARD, RALEIGH C 7440 SKIPPER LANE TALLAHASSEE, FL 32317		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S KING, A. WAYNE 1909 MALLORY SQUARE TALLAHASSEE, FL 32308 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Ernest Jones 1737 Atkamire Dr Tallahassee, FL 32304 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SMITH, CLARENCE V 3207-22 SHAMROCK EAST TALLAHASSEE, FL 32309 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Jack Hampton 2106 Shady Oak Dr. Tallahassee, FL 32303 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RAGANS, JIMMY 1305 PARGA STREET TALLAHASSEE, FL 32304 ☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Raleigh C. Leonard 7440 Skipper Lane Tallahassee, FL 32317 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV HAMILTON, RICHARD 6317 PICKNEY HILL RD TALLAHASSEE, FL 32312 ☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Charles Hair 8752 Community Rd Tallahassee, FL 32305 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CARUTHERS, GENE 4052 MCLAUGHLIN RD. TALLAHASSEE, FL 32309 ☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Ternan Gandy 1421 Pullen Rd Tallahassee, FL 32305 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Leo Hebert 2104 Joyner Dr. Tallahassee, FL 32303 ☐ Change ☒ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Charles V. Smith, Treasurer</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			3/6/05 850-893-0434 Date Daytime Phone #		