2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#730720

FILED Apr 14, 2009 Secretary of State

Entity Name: TALLAHASSEE BOATING CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 1 GRETCHEN LN SOPCHOPPY, FL 323580403 **Current Mailing Address: New Mailing Address:** C/O ROBYN KINSEY, TREASURER PO BOX 1184 WOODVILLE, FL 32362 2071 HICKORY LANÉ TALLAHASSEE, FL 32305 FEI Number: 59-3070769 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: CAUSSEAUX, NANETTE MOORE, DONNIE 8067 WOODVILLE HWY. 54 NORŤHWOOD LANE TALLAHASSEE, FL 32305 US US CRAWFORDVILLE, FL 32327 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: DONNIE MOORE 04/14/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MOORE, DONNIE Name: Name: 54 NORTHWOOD LANE Address: Address: City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: Title: Title: () Delete () Change () Addition MARTIN, JIMMY Name: Name: Address: 2228 DOZIER DR Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: Title: () Delete Title: () Change () Addition CAUSSEAUX, NANETTE Name: Name: P.O. BOX 1229 Address: Address: City-St-Zip: WOODVILLE, FL 32362 City-St-Zip: (X) Change () Addition Title: TD () Delete Title: TD CONNELL, JANICE Name: Name: KINSEY, ROBYN 2071 HICKORY LANE Address: 5409 DEBBIE DR Address: City-St-Zip: TALLAHASSEE, FL 32310 City-St-Zip: TALLAHASSEE, FL 32305 Title: VPD () Delete Title: () Change () Addition FEWELL, RICKY Name: Name: 14 LESLIE ANN ST Address: Address: City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: Title: () Delete Title: (X) Change () Addition WHITE, BOBBY JACK MOORE, HOPE Name: Name: Address: 743 LAWHON MILL RD Address: 54 NORTHWOOD LANE CRAWFORDVILLE, FL 32327 CRAWFORDVILLE, FL 32327 City-St-Zip: 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: NANETTE CAUSSEAUX S 04/14/2009