## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## FILED **DOCUMENT #742869** THE INTER-CIVIC COUNCIL OF THE SOUTHERN 07 DEC -7 AM 10: 55 CHRISTIAN LEADERSHIP COUNCIL OF TALLAHASSEE. **INCORPORATE** SECKLIARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 6504 N. MERIDIAN ROAD POST OFFICE BOX 3086 TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32315 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 12072007 Chq-NP CR2E037 (12/06) City & State City & State 4. FEI Number 57-1219264 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Laurq BAKER, CHERYL Street Address (P.O. Box Number is Not Acceptable) 1101 BENNETT STREET TALLAHASSEE, FL 32304 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 Z (NOTE: Registered Agent signature required when reinstating) typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be Make check payable to Amended AR is \$61.25 Trust Fund Contribution. П Florida Department of State -Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. President hairman of the Board Icc TITLE PCEO ☐ Delete TITLE FOUTZ, SR., WILLIAM REV. NAME NAME 6504 N. MERIDIAN ROAD STREET ADDRESS STREET ADDRESS TALLAHASSEE, FL 32312 CITY-ST-7IP CITY - ST - ZIP TANWER Drive 1VP TITLE ☐ Delete TITLE ☐ Addition HARRIS, WILLIE REV. NAME STREET ADDRESS 2009 WARWICK ST. STREET ADDRESS TAllahassee Fl. 32305 TALLAHASSEE, FL 32310 CITY-ST-ZIP CITY-ST-ZIP 2VP TITLE Delete TITLE ☐ Change ☐ Addition LAMB, WILLIE REV. NAME NAME Sarg. a Arms Samuel L. Dixie Change 1105 TANNER BT Thomas See Fla. 32305 STREET ADDRESS 1714 WEST STREET STREET ADDRESS CITY-ST-ZIP BAINBRIDGE\_EL\_30810 CITY-ST-7IP TITLE 3∀P~ ☐ Delete TITLE FOUTZ, WILLIAM JR. NAME NAME STREET ADDRESS 6504-N. MERIDIAN ROAD+ STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL -32312-CITY-ST-ZIP Addition TITLE Defete TITLE BAKER, CHERYL NAME NAME 1101 BENNETT STREET STREET ADDRESS STREET ADDRESS TALLAHASSEE, FL 32304 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition SHEPARD, LYNN NAME NAME 1109 WOODLAND DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32305 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 👱 und FICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

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