2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jun 13, 2<u>0</u>08 **DOCUMENT#756629** Secretary of State

Entity Name: TALLAHASSEE COMMUNITY COLLEGE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

444 APPLEYARD DR

TALLAHASSEE, FL 32304 US

Current Mailing Address: New Mailing Address:

ROBIN JOHNSON 444 APPLEYARD DR

TCC FOUNDATION, 444 APPLEYARD DRIVE TALLAHASSEE, FL 32304 US

TALLAHASSEE, FL 323042895 US

FEI Number: 59-2091480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOHNSTON9, ROBIN JOHNSTON, ROBIN TCC FOUNDATION TCC FOUNDATION 444 APPLEYARD DR, ADM 227

444 APPLEYARD DR, ADM 227 TALLAHASSEE, FL 32304 US TALLAHASSEE, FL 32304 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: ROBIN JOHNSTON 06/13/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

JOHNSTON, ROBIN Name: Name: 444 APPLEYARD DRIVE, #228 Address: Address: City-St-Zip: TALLAHASSEE, FL 323042895 US City-St-Zip:

Title: Title: PD (X) Change () Addition () Delete

BELL, DOUGLAS Name: HUNTER, TODD Name:

Address: 215 S. MONROE STREET Address: 2580 CARE DRIVE, SUITE ONE City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32308

Title: () Delete Title: (X) Change () Addition

MCCASKILL, MARTHA FREELAND, ALLEN Name: Name: 170 HICKERY LANE Address: Address: 7121 COASTAL HIGHWAY City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: CRAWFORDVILLE, FL 32327

() Delete Title: D Title: VD (X) Change () Addition

Name: RYLL, FRANK Name: BELL, DOUGLAS S 136 S. BRONOUGH Address: Address: 215 S. MONROE STREET City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301

Title: () Delete Title: SD (X) Change () Addition

HUNTER, TODD RODGERS, JIM Name: Name:

407 EAST 6TH AVE 205 NORTH MADISON STREET Address: Address:

City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: QUINCY, FL 32351

Title: () Delete Title: (X) Change () Addition

FREELAND, ALLEN BRANDT, NOLIA Name: Name: Address: 7121 COASTAL HIGHWAY Address: 1412 N. RANDOLPH CR. TALLAHASSEE, FL 32308 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: ROBIN JOHNSTON Μ 06/13/2008