2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# 760826

Entity Name: MILITARY OFFICERS ASSOCIATION OF AMERICA - TALLAHASSEE CHAPTER, INC.

Current Principal Place of Business:

P.O. OFFICE BOX 4038
TALLAHASSEE, FL 32315

New Principal Place of Business:

Current Mailing Address:

P.O. OFFICE BOX 4038
TALLAHASSEE, FL 32315

New Mailing Address:

FEI Number: 59-2957429 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COPPINS, CRAY J
2888 N HANNON HILL DR.
TALLAHASSEE, FL 32309 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:	PRES	( ) Delete
Name:	COPPINS, CRAY J	
Address:	2888 N. HANNON HILL DR.	
City-St-Zip:	TALLAHASSEE, FL 32309 US	
Title:	VP	( ) Delete
Name:	MOCK, DAVID B	
Address:	3687 CORINTH DR	
City-St-Zip:	TALLAHASSEE, FL 32308 US	
Title:	VP	( ) Delete
Name:	MURRAY, STEVE	
Address:	2623 WYSSES RD.	
City-St-Zip:	TALLAHASSEE, FL 32312 US	
Title:	SEC	( ) Delete
Name:	AVERY, CHARLES J	
Address:	2416 GOTHIC DR.	
City-St-Zip:	TALLAHASSEE, FL 32308 US	
Title:	TREA	( ) Delete
Name:	HENTZ, JAMES D	
Address:	3119 MIDDLEBROOK CIR	
City-St-Zip:	TALLAHASSEE, FL 32312 US	
Title:	DIR	( ) Delete
Name:	MOORE, EDMOND L	
Address:	1405 WOODGATE WAY	
City-St-Zip:	TALLAHASSEE, FL 32308 US	

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:	
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: JAMES D. HENTZ TREA 01/21/2009

Electronic Signature of Signing Officer or Director — Date