

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762912

FILED
Feb 15, 2010
Secretary of State

Entity Name: THE COMMITTEE OF NINETY-NINE OF TALLAHASSEE/LEON COUNTY, INC.

Current Principal Place of Business:

3606 MACLAY BOULEVARD SOUTH
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

P O BOX 1702
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 59-2202411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADIGAN, TERRELL G
1052 SUMMERBROOKE DRIVE
TALLAHASSEE, FL 32312 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: D
Name: HUNT, JOHN E JR.
Address: 3606 MACLAY BLVD SOUTH
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: COE, THOMAS R
Address: 3242 ROBINHOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: POPE, MELVIN
Address: PO BOX 3636
City-St-Zip: TALLAHASSEE, FL 32315

Title: D
Name: MADIGAN, TERRELL C
Address: P O BOX 10321
City-St-Zip: TALLAHASSEE, FL 32302

Title: T
Name: SMITH, WILLIAM P
Address: P.O. BOX 10133
City-St-Zip: TALLAHASSEE, FL 32301

Title: P
Name: CROY, GAIL
Address: 1446 DENHOLM DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM P SMITH

TREA

02/15/2010

Electronic Signature of Signing Officer or Director

Date