2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT May 01, 2008 08:00 AN Secretary of State **DOCUMENT # F66075** 1. Entity Name TALL TIMBERS INVESTMENT CORPORATION Principal Place of Business Mailing Address 230 JOHN KNOX RD 230 JOHN KNOX RD SUITE 2 SUITE 2 TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303 04302008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-8404820 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DRAKE, THADDEUS V DO NOT WRITE 230 JOHN KNOX RD TALLAHASSEE, FL 32303 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent eignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees U00000933871 05/20/00 00045-005-150.00 10. OFFICERS AND DIRECTORS PD TITLE NAME DRAKE, THADDEUS V STREET ADDRESS 230 JOHN KNOX RD CITY-ST-ZIP TALLAHASSEE, FL 32303 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 607, 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

BSD-386-66 11

Daytime Phone #