

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F77939

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: TOPS OF TALLAHASSEE, INC.

## Current Principal Place of Business:

3207 W THARPE ST  
TALLAHASSEE, FL 32303

## New Principal Place of Business:

## Current Mailing Address:

3207 W THARPE ST  
TALLAHASSEE, FL 32303 US

## New Mailing Address:

3207 W THARPE ST  
TALLAHASSEE, FL 32303

FEI Number: 59-2158549

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELUCA, JOSEPH G  
3207 WEST THARPE STREET  
TALLAHASSEE, FL 32303 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: STD ( ) Delete  
Name: DELUCA, KAROL SUE,  
Address: 3114 LAKESHORE DR  
City-St-Zip: TALLAHASSEE, FL 32312

Title: DP ( ) Delete  
Name: DELUCA, JOSEPH G,  
Address: 3114 LAKESHORE DR  
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP ( ) Delete  
Name: DELUCA, JOSEPH G JR.  
Address: 2107 PADLOCK PLACE  
City-St-Zip: TALLAHASSEE, FL 32303

## 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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAROL SUE DELUCA

STD

04/10/2008

Electronic Signature of Signing Officer or Director

Date