

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H04133

FILED
Feb 22, 2008
Secretary of State

Entity Name: THE TALLAHASSEE FLYING CLUB, INC.

Current Principal Place of Business:

1915 ANGELS HOLLOW
TALLAHASSEE, FL 32308

New Principal Place of Business:

1840 WINERY WAY
TALLAHASSEE, FL 32317

Current Mailing Address:

1915 ANGELS HOLLOW
TALLAHASSEE, FL 32308

New Mailing Address:

1840 WINERY WAY
TALLAHASSEE, FL 32317

FEI Number: 59-2549108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, MARTIN A
1915 ANGELS HOLLOW
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

ROBERTS, MARTIN A
1840 WINERY WAY
TALLAHASSEE, FL 32317 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: MARTIN A ROBERTS

02/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBERTS, MARTIN
Address: PO BOX 14495
City-St-Zip: TALLAHASSEE, FL 32317

Title: SD () Delete
Name: FULLER, DENNIS
Address: 9387 SALEM ROAD
City-St-Zip: QUINCY, FL 32353

Title: TD () Delete
Name: FLEMING, C. KEVIN
Address: 1915 ANGELS HOLLOW
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: FLEMING, C. KEVIN
Address: 1840 WINERY WAY
City-St-Zip: TALLAHASSEE, FL 32317

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: C KEVIN FLEMING

TD

02/22/2008

Electronic Signature of Signing Officer or Director

Date