

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

02 NOV 12 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L90046

1. Entity Name THE TALLAHASSEE STREETMOLDEN, INC

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

DO NOT WRITE
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.

SIGNATURE David Morgan

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT DAVID MORGAN 3235 515 S. BELLAMY DR, QUINCY FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. BILL FLOWEN 1555 14th AVE N.W CAIRO, GA 31729
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURY DAVID ISAACS 431 WAVELEY RD TALLAHASSEE, FL 32392
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC CATHY MORGAN 515 S. BELLAMY DR QUINCY 1 FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR SANDY FUGATE 10100 VETERAN MEMORIAL TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR BILL WEHUNT 321 CLENDVIEW DR TALLAHASSEE, FL 32303

TITLE NAME STREET ADDRESS CITY-ST-ZIP	100009508801 12/13/02--01062--021 **158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

David Morgan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

875-1984

CR2E034B (12/01)

11/12/02

I am the new president of "the Tallahassee streetrodder". We have checked with the members and post officer. No one remembers receiving any forms or notices. There have been several people with access to our mail box. We have taken steps to ensure this will not happen again. Again, we did not receive our UBR report for 2002.

Thank you

Daf Morgan, President

"THE Tallahassee Streetrodder, Inc."