

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005046

FILED  
Mar 26, 2007  
Secretary of State

Entity Name: COPS FOR KIDS - TALLAHASSEE, INC.

## Current Principal Place of Business:

POST OFFICE BOX 245  
TALLAHASSEE, FL 32302

## New Principal Place of Business:

3510 BANKHEAD CT  
TALLAHASSEE, FL 32309

## Current Mailing Address:

POST OFFICE BOX 245  
TALLAHASSEE, FL 32302

## New Mailing Address:

FEI Number: 59-3617530

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, ANTHONY J  
3510 BANKHEAD  
TALLAHASSEE, FL 32306 US

## Name and Address of New Registered Agent:

SMITH, ANTHONY J  
3510 BANKHEAD CT  
TALLAHASSEE, FL 32309 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: ANTHONY J. SMITH

03/26/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SMITH, ANTHONY J  
Address: POST OFFICE BOX 245  
City-St-Zip: TALLAHASSEE, FL 32302

Title: D ( ) Delete  
Name: GUIDRY, KEVIN P  
Address: POST OFFICE BOX 245  
City-St-Zip: TALLAHASSEE, FL 32302

Title: STD ( ) Delete  
Name: PATE, DAVID M  
Address: POST OFFICE BOX 245  
City-St-Zip: TALLAHASSEE, FL 32302

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SMITH, ANTHONY J  
Address: 3510 BANKHEAD CT  
City-St-Zip: TALLAHASSEE, FL 32309

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

Title: STD (X) Change ( ) Addition  
Name: PATE, DAVID M  
Address: 1165 SUMMERBROOKE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID M. PATE

STD

03/26/2007

Electronic Signature of Signing Officer or Director

Date