## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000007587

FILED Apr 19, 2006 Secretary of State

Entity Name: CAPITAL HILLS NEIGHBORHOOD ASSOCIATION, INC., OF TALLAHASSEE

Current Principal Place of Business: New Principal Place of Business:

C/O MARY ANNE HELTON

1204 HAWTHORNE ST

TALLAHASSEE, FL 32308

C/O JEREMY GORDON

1507 SAULS ST

TALLAHASSEE, FL 32308

Current Mailing Address: New Mailing Address:

C/O MARY ANNE HELTON
1204 HAWTHORNE ST
TALLAHASSEE, FL 32308

C/O JEREMY GORDON
1507 SAULS ST
TALLAHASSEE, FL 32308

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HELTON, MARY ANNE
C/O MARY ANNE HELTON
C/O JENNIFER GORDON
1204 HAWTHORNE ST
TALLAHASSEE, FL 32308 US
GORDON, JENNIFER
C/O JENNIFER GORDON
1507 SAULS ST
TALLAHASSEE, FL 32308 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: JENNIFER GORDON 04/19/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

TALLAHASSEE, FL 32308

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: HELTON, JOSEPH M JR. Name: GORDON, JEREMY

Address: 1204 HAWTHORNE ST. Address: 1507 SAULS ST
City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308

Title: 1STV () Delete Title: (X) Change ( ) Addition GORDON, JEREMY Name: SULLIVAN-HACKLEY, LAURA Name: Address: 1507 SAULS ST. Address: 936 SPOTTSWOOD City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308

Title: S ( ) Delete Title: T (X) Change ( ) Addition

Name:SULLIVAN-HACKLEY, LAURAName:GORDON, JENNIFERAddress:936 SPOTTSWOOD DRAddress:1507 SAULS ST

City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308

Title: T (X) Delete Title: ( ) Change ( ) Addition
Name: HENSHAW, VICTOR Name:
Address: 941 SPOTTSWOOD DR Address:

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.

City-St-Zip:

SIGNATURE: MARY ANNE HELTON BRD. 04/19/2006

Electronic Signature of Signing Officer or Director

Date