3/1 2000 UNIFORM BUSINESS REPORT (UBR) **DOMENT.#. NO0502** May 17, 2000 8:00 am Entity Name Secretary of State CLUB OF TALLAHASSEE-KILLEARN, FLORIDA, I 03-07-2000 90084 022 ****61.25 Mailing Address igual Piace of Business 1430 DENHOLM DRIVE DENHOLM DRIVE FALLAHASSEE FL 32312-2900 TTT FL 32312 /3. Mailing Address Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2263033 Not Applicable Country \$8.75 Additional Country 5.- Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name 13 ERNARD HIGGIN S Street Address (P.O. Box Number is Not Acceptable) Tallir, Benjamin R 3 DENHOÑ DRIVE NEW MAILING ADDRESS, ETC. 3329 FOLEY DR NHASCEF PL 92312 7ALLAHASSEE The above named ent (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9 Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. CR2E037 (9/55) PD **Addition** Change S Delete TITLE Jim THOWAS MAME KERWIN, JOHN Y 4737 TORY SOUND LANE STREET ADDRESS 3172 BROCKTON WAY TALLAHASSEE, ITL 32308 CITY-ST-ZIP ST 7(P TALLAHASSEE FL 32312 Change Addition TITLE ☐ Delete GEORGE SWEAT NAME HIGGINS, BERNIE LZ608 HAR WICH CIRCLE STREET ADDRESS 3329 FOLEY DRIVE TALLAHASSER, FL CHY-ST-ZIP ST ZIP TALLAHASSEE FL 32308 Addition Change Delete. TITLE EARL BUFTON NAME FULLER, BENJAMIN R. STREET ADDRESS 1430 DENHOLM DRIVE TALLAHASSES, FL 32308 CITY-ST-ZIP \$1.28 TALLAHASSEE FL Change Addition Delete TITLE - 64 Luebkemann, celia NAME STREET ADORESS 3004 BROOKMONT CITY-ST-ZIP ST ZIP TALLAHASSEE FL 32312 Change ☐ Addition Delete TITLE MAME STREET ADDRESS ন্তপ্ত SY 219 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME Annange STREET ADDRESS

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. | 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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FROMROJHICKINS TREMOUNCE að