

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002808

FILED
Feb 20, 2012
Secretary of State

Entity Name: STORK'S NEST TALLAHASSEE, INC.

Current Principal Place of Business:

2813 S. MERIDIAN ST.
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

P O BOX 10668
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 59-3221794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENNIS, VITALIS
2217 GREENWICH WAY
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ABC
Name: SIMMONS, SARAH
Address: 1752 KAY AVE. SUITE A
City-St-Zip: TALLAHASSEE, FL 32301

Title: ABM
Name: KING, SANDRA
Address: 618 FAMACEE AVENUE
City-St-Zip: TALLAHASSEE, FL 32310

Title: ABM
Name: REESE, KRISTI
Address: 2140 CENTERVILLE PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: ABM
Name: HERRING, CLARENCE
Address: 4003 KILMARTIN DR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM
Name: JAMES, MALINDA
Address: 8688 ALEXANDRITE CT.
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM
Name: BROWN, ROSA
Address: 2825 W ORANGE AVE.
City-St-Zip: TALLAHASSEE, FL 32310

I hereby 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 all other like empowered.

SIGNATURE: VITALIS DENNIS

RA

02/20/2012

Electronic Signature of Signing Officer or Director

Date