2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2008 8:00 am
Secretary of State
03-03-2008 90192 014 ****61.25

DOCUMENT # N01855

1. Entity Name

THE TALLAHASSEE CHAPTER OF SOCIETY OF FINANCIAL SERVICES PROFESSIONALS, INC.

Principal Place of Business	Mailing Address
805 WAVERLY RD TALLAHASSEE FL 32312	805 WAVERLY RD TALLAHASSEE FL 32312

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2914216 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FLEET, EDWIN S.
805 WAVERLY RD
TALLAHASSEE FL 32312

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOWARD, JOHN 1117 THOMASVILLE RD TALLAHASSEE FL 32303	☒ Delete	TITLE P D NAME STREET ADDRESS CITY-ST-ZIP	Frank, James W. 1925 Buford Blvd Tallahassee, FL 32308	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AVANT, GEORGE 2908 NORTHMONT DR TALLAHASSEE FL 32303	☒ Delete	TITLE PP NAME STREET ADDRESS CITY-ST-ZIP	Barnes, Travis P.O. Box 14108 Tallahassee, FL 32317	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PPD TYCHSEN, PETE 1695-1 METROPOLITAN CIRCLE TALLAHASSEE FL 32308	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Avant, George 259 John Knox Rd. Tallahassee, FL 32303	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FLEET, EDWIN S 805 WAVERLY RD TALLAHASSEE FL 32312	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Spitzer, Philip P.O. Box 14346 Tallahassee, FL 32317-4346	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BARNES, TRAVIS P O BOX 14099 TALLAHASSEE FL 32317	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Toole, Giles P.O. Box 14099 Tallahassee, FL 32308	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FRANK, JAMES W. 1925 BUFORD BLVD. TALLAHASSEE FL 32308	☒ Delete	TITLE VP NAME D STREET ADDRESS CITY-ST-ZIP	Curry, John P.O. Box 3892 Tallahassee, FL 32315-3892	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 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.

SIGNATURE: Edwin S. Fleet, Edwin S. Fleet 2-22-2008