

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01855

FILED
Mar 08, 2011
Secretary of State

Entity Name: THE TALLAHASSEE CHAPTER OF SOCIETY OF FINANCIAL SERVICES PROFESSIONALS, INC.

Current Principal Place of Business:

805 WAVERLY RD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

805 WAVERLY RD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 59-2914216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEET, EDWIN S.
805 WAVERLY RD
TALLAHASSEE, FL 32312 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: PP/D
Name: FRANK, JAMES W
Address: 1925 BUFORD BLVD
City-St-Zip: TALLAHASSEE, FL 32308

Title: P/D
Name: CURRY, JOHN
Address: P.O. BOX 3892
City-St-Zip: TALLAHASSEE, FL 32315

Title: D
Name: AVANT, GEORGE
Address: 259 JOHN KNOX RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: T/D
Name: FLEET, EDWIN S
Address: 805 WAVERLY RD.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: TOOLE, GILES
Address: P.O. BOX 14099
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: BARNES, TRAVIS
Address: P.O. BOX 14108
City-St-Zip: TALLAHASSEE, FL 32317

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: EDWIN S. FLEET

T/D

03/08/2011

Electronic Signature of Signing Officer or Director

Date