## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000002984

FILED Apr 20, 2009 Secretary of State

Entity Name: TALLAHASSEE ASTRONOMICAL SOCIETY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2880 CERCY TRACE TALLAHASSEE, FL 32309 **Current Mailing Address: New Mailing Address:** 2880 CERCY TRACE TALLAHASSEE, FL 32309 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: KOCHANOWSKY, GENE 2864 CERCY TRACE TALLAHASSEE, FL 32309 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VDEC () Change () Addition () Delete HALEY, JOE Name: Name: 611 COLLINS DR. Address: Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: OC Title: ( ) Delete () Change () Addition SKELLEY, WILLIAM Name: Name: Address: 1340 LANDOVER PL Address: City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip: Title: TSD () Delete Title: (X) Change ( ) Addition PELFREY, JAN Name: HOWARD, CONRAD Name: 9289 TAFF ROAD 16933 LAKE CHRISTIANA CT Address: Address: City-St-Zip: TALLAHASSEE, FL 32305 City-St-Zip: TALLAHASSEE, FL 32310 Title: VΡ Title: () Change () Addition ( ) Delete Name: KOCHANOWSKY, GENE Name: 2864 CERCY TRACE Address: Address: TALLAHASSEE, FL 32309 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition HOLLAND, JIM KOPCZYNSKI, KEN Name: Name: 3127 SHARER ROAD 1114 BRANDT DRIVE Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: TALLAHASSEE, FL 32308 Title: (X) Delete Title: () Change () Addition KOPCZYNSKI, KEN Name: Name: Address: 1114 BRANDT DRIVE Address: TALLAHASSEE, FL 32308 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: CONRAD HOWARD T 04/20/2009