# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 29, 2009**
**Secretary of State**

DOCUMENT# N02000004392

**Entity Name:** TALF, INC.

**Current Principal Place of Business:**

799 OVERLOOK DRIVE
WINTER HAVEN, FL 33884

**New Principal Place of Business:**

3391 CYPRESS GARDENS RD.
WINTER HAVEN, FL 33884

**Current Mailing Address:**

799 OVERLOOK DRIVE
WINTER HAVEN, FL 33884

**New Mailing Address:**

3391 CYPRESS GARDENS RD.
WINTER HAVEN, FL 33884

**FEI Number: 56-2281101** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

F & L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 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: P ( ) Delete
Name: MOORE, RONNIE
Address: 799 OVERLOOK DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP ( ) Delete
Name: MOORE, MARYLOU
Address: 799 OVERLOOK DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: S ( ) Delete
Name: TATE, CHARLES
Address: 799 OVERLOOK DR
City-St-Zip: WINTER HAVEN, FL 33884

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: MOORE, RONNIE
Address: 3391 CYPRESS GARDENS RD.
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP (X) Change ( ) Addition
Name: MOORE, MARYLOU
Address: 3391 CYPRESS GARDENS RD.
City-St-Zip: WINTER HAVEN, FL 33884

Title: S (X) Change ( ) Addition
Name: TATE, CHARLES
Address: 3391 CYPRESS GARDENS RD.
City-St-Zip: WINTER HAVEN, FL 33884

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: JOHN A. MCCOY M 01/29/2009

Electronic Signature of Signing Officer or Director — Date