2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N03000000413

Entity Name: THE TALLAHASSEE PARROTHEAD CLUB, INC.

Current Principal Place of Business:

1830 NORTH MONROE ST
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 38033
TALLAHASSEE, FL 323158033

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TYER, BOBBIE J
18 SHADOW OAK CIRCLE
CRAWFORDVILLE, FL 32327 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: PRES ( ) Delete
Name: WEIMER, PENNY
Address: P O BOX 38033
City-St-Zip: TALLAHASSEE, FL 32315

Title: TRES ( ) Delete
Name: TYER, BOBBIE J
Address: 18 SHADOW OAK CIRCLE
City-St-Zip: CRAWFORDVILLE, FL 32327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: LLUVARUS, PAULA
Address: P O BOX 38033
City-St-Zip: TALLAHASSEE, FL 32315

Title: ( ) Change ( ) Addition
Name:
Address:
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: BOBBIE TYER TRES 03/23/2009

Electronic Signature of Signing Officer or Director — Date