

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006980

FILED
Aug 16, 2004
Secretary of State**Entity Name:** THE TALLAHASSEE STREETRODDERS, INC.**Current Principal Place of Business:**PO BOX 5241
TALLAHASSEE, FL 32314**New Principal Place of Business:****Current Mailing Address:**PO BOX 5241
TALLAHASSEE, FL 32314**New Mailing Address:****FEI Number:** 20-0523087**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MORGAN, DAVID
66 CONNIE DR
SHELL POINT, 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: PD () Delete
Name: MORGAN, DAVID
Address: PO BOX 5241
City-St-Zip: TALLAHASSEE, FL 32314

Title: VD () Delete
Name: FLOWERS, BILL
Address: PO BOX 5241
City-St-Zip: TALLAHASSEE, FL 32314

Title: TD () Delete
Name: ISAACS, DAN
Address: PO BOX 5241
City-St-Zip: TALLAHASSEE, FL 32314

Title: SD () Delete
Name: MORGAN, CATHY
Address: PO BOX 5241
City-St-Zip: TALLAHASSEE, FL 32314

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WEHUNT, BILL
Address: 112 QUAIL COURT
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D (X) Change () Addition
Name: THOMAS, LEE
Address: 2010 20TH STREET
City-St-Zip: CAIRO, GA 31728

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: MEEHAN, TOM
Address: 7636 BRANGUS DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Change (X) Addition
Name: RAMSEY, LEON
Address: 2469 RIVER ROAD
City-St-Zip: TALLAHASSEE, FL 32460

Title: DP () Change (X) Addition
Name: FUGATE, SANDY
Address: 10180 VETERANS MEMORIAL HIGHWAY
City-St-Zip: TALLAHASSEE, FL 32308

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BILL WEHUNT

PRES

08/16/2004

Electronic Signature of Signing Officer or Director

Date