2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2009
Secretary of State

DOCUMENT# N03000006980

Entity Name: THE TALLAHASSEE STREETRODDERS, INC.

Current Principal Place of Business:

431 WAVERLY ROAD
TALLAHASSEE, FL 32312

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 ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ISAACS, DAN
431 WAVERLY ROAD
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:	DP	( ) Delete
Name:	ISAACS, DAN	
Address:	431 WAVERLY ROAD	
City-St-Zip:	TALALHASSEE, FL 32312	
Title:	DVP	( ) Delete
Name:	WATTS, JIM	
Address:	1821 SAGEWAY DR	
City-St-Zip:	TALLAHASSEE, FL 32303	
Title:	TS	( ) Delete
Name:	HUNZIKER, CHERYL	
Address:	1454 20TH STREET	
City-St-Zip:	CAIRO, GA 39828	
Title:	DT	( ) Delete
Name:	WEST, STAN	
Address:	7 ALMA DR., PO BOX 35	
City-St-Zip:	ST. MARKS, FL 32355	
Title:	D	( ) Delete
Name:	HANBURY, JACK	
Address:	411 TIMBER RUN	
City-St-Zip:	HAVANA, FL 32333	
Title:	D	(X) Delete
Name:	MERRITT, RAYMOND	
Address:	3337 CHARLESTON RD	
City-St-Zip:	TALLAHASSEE, FL 32309	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DT	(X) Change ( ) Addition
Name:	WATTS, NANCY	
Address:	1821 SAGEWAY DR	
City-St-Zip:	TALLAHASSEE, FL 32303	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: DAN LEE ISAACS DP 05/03/2009

Electronic Signature of Signing Officer or Director — Date