

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008451

FILED
Mar 09, 2004
Secretary of State

Entity Name: APALACHEE TORTOISE, INCORPORATED

Current Principal Place of Business:

9471 AVENIDA DE LA LUNA
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

9471 AVENIDA DE LA LUNA
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 13-4265120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEATON, EDWARD
9471 AVENIDA DE LA LUNA
TALLAHASSEE, FL 32309 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: D () Delete
Name: DEATON, EDWARD
Address: P O BOX 5932
City-St-Zip: TALLAHASSEE, FL 32314

Title: D () Delete
Name: KERNER, KITTY
Address: P O BOX 5932
City-St-Zip: TALLAHASSEE, FL 32314

Title: D () Delete
Name: MCDONALD, CLAYTON
Address: P O BOX 5932
City-St-Zip: TALLAHASSEE, FL 32314

Title: D () Delete
Name: WEDDINGTON, MICHAEL
Address: P O BOX 5932
City-St-Zip: TALLAHASSEE, FL 32314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: KERNER, KATRIN
Address: P O BOX 5932
City-St-Zip: TALLAHASSEE, FL 32314

Title: D (X) Change () Addition
Name: MACDONALD, CLAYTON
Address: P O BOX 5932
City-St-Zip: TALLAHASSEE, FL 32314

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

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: CLAYTON MACDONALD

D

03/09/2004

Electronic Signature of Signing Officer or Director

Date