2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# N03000010207

Entity Name: TALLAHASSEE REGION SOAP BOX DERBY, INC.

Current Principal Place of Business:

1903 MYRICK RD
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

1903 MYRICK RD
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 20-0424176 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, NEAL E
1903 MYRICK RD
TALLAHASSEE, FL 32303 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: MRS ( ) Delete
Name: DAVIS, NANCY SEC
Address: 1903 MYRICH RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: MR. ( ) Delete
Name: DAVIS, NEAL PRES
Address: 1903 MYRIC RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: MRS ( ) Delete
Name: EVANS, PATRICIA D VP
Address: 4009 CAMINO REAL
City-St-Zip: TALLAHASSEE, FL 32311

Title: MRS ( ) Delete
Name: ASBELL, TONYA L TREA
Address: PO BOX 486
City-St-Zip: WOODVILLE, FL 32362

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: ( ) 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: NEAL E DAVIS PRE 03/19/2009

Electronic Signature of Signing Officer or Director — Date