

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000010139 1. Entity Name TALLAHASSEE THUNDERBOLTS, INC.	
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Principal Place of Business 2981 KILLEARN POINTE COURT TALLAHASSEE, FL 32312	Mailing Address 2981 KILLEARN POINTE COURT TALLAHASSEE, FL 32312
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DO NOT WRITE IN THIS SPACE



01132006 No Chg-NP CRZE037 (11/05)

4. FEI Number 20-2060590	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FRASER, ROBERT E 2981 KILLEARN POINTE COURT TALLAHASSEE, FL 32312
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

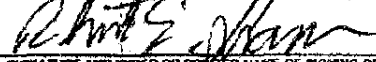
SIGNATURE Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reappointing)	DATE
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Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	1100000401895 02/02/06-80064-006 61.25
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10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WEST, TERESA N 9809 HAWEK RIDGE RD TALLAHASSEE, FL 32312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FRASER, ROBERT E 2981 KILLEARN POINTE CT TALLAHASSEE, FL 32312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Robert E. FRASER	Date 1/13/06	850-508-4466 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		