

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 27, 2009**  
**Secretary of State**

DOCUMENT# N06000003000

Entity Name: TALLAHASSEE FELLOWSHIP, INC.

**Current Principal Place of Business:**

6734 LAYTON COURT  
TALLAHASSEE, FL 32317

**New Principal Place of Business:**

**Current Mailing Address:**

6734 LAYTON COURT  
TALLAHASSEE, FL 32317

**New Mailing Address:**

FEI Number: 20-4510582      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MCKIBBEN, R. BRUCE JR  
6734 LAYTON COURT  
TALLAHASSEE, FL 32317      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: MCKIBBEN, CANDACE C REV.  
Address: 6734 LAYTON COURT  
City-St-Zip: TALLAHASSEE, FL 32317

Title: D      ( ) Delete  
Name: BARKSDALE, JOHN  
Address: 1333 LAWNSDALE ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

Title: D      ( ) Delete  
Name: BARKSDALE, JACQUELINE  
Address: 1333 LAWNSDALE ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

Title: D      ( ) Delete  
Name: BARKSDALE, ELYSE  
Address: 1333 LAWNSDALE ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

Title: D      ( ) Delete  
Name: BENNETT, MARTY  
Address: 7764 MACLEAN ROAD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: D      ( ) Delete  
Name: BENNETT, BRETT  
Address: 7764 MACLEAN ROAD  
City-St-Zip: TALLAHASSEE, FL 32312

**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:

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: CANDACE C. MCKIBBEN

D

01/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date