

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004642

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: TALLAHASSEE USBC ASSOCIATION, INC.

## Current Principal Place of Business:

2060 WHITE ASH WAY  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

## Current Mailing Address:

2060 WHITE ASH WAY  
TALLAHASSEE, FL 32308

## New Mailing Address:

FEI Number: 42-1706104

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRIFFIN, DONALD A  
2836 KILKIERANE DRIVE  
TALLAHASSEE, FL 323092661 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: P ( ) Delete  
Name: MEYERS, BRUCE  
Address: 3327 HANCOCK DR  
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP ( ) Delete  
Name: GATLIN, DAN  
Address: 723 WEST KING ST  
City-St-Zip: QUINCY, FL 32351

Title: AMGR ( ) Delete  
Name: CIRIONI, TRACI  
Address: 2060 WHITE ASH WAY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: BOD ( ) Delete  
Name: BROWN, AL  
Address: 3207 SHAMROCK E #33  
City-St-Zip: TALLAHASSEE, FL 32309

Title: BOD ( ) Delete  
Name: CARTER, OLIVIA  
Address: 1911 RAA AVE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: BOD ( ) Delete  
Name: TRAMEL, WILLIAM L JR  
Address: 2525 TALLAVANA TR  
City-St-Zip: HAVANA, FL 32333

## 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: BOD (X) Change ( ) Addition  
Name: FRISBEE, HARRY  
Address: 1402 MITCHELL AVE  
City-St-Zip: TALLAHASSEE, FL 32303

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

Title: BOD (X) Change ( ) Addition  
Name: STOKES, MYRREL  
Address: P O BOX 1068  
City-St-Zip: WOODVILLE, FL 32362

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: TRACI CIRIONI

AMGR

04/14/2009

Electronic Signature of Signing Officer or Director

Date