## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000003895

Apr 13, 2009 Secretary of State

Entity Name: THRESHING FLOOR COMMUNITY OUTREACH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2600-A APALACHEE PARKWAY SUITE BASEMENT TALLAHASSEE, FL 32301 **New Mailing Address: Current Mailing Address:** 2600-A APALACHEE PARKWAY SUITE BASEMENT TALLAHASSEE, FL 32301 FEI Number: 26-4170789 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LUMPKIN, RONALD B 5001 BRANDED OAKS CT. TALLAHASSEE, FL 32311 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition LUMPKIN, RONALD B LUMPKIN, DETRIS W Name: Name: 5001 BRANDED OAKS CT. Address: 5001 BRANDED OAKS CT. Address: City-St-Zip: TALLAHASSEE, FL 32311 US City-St-Zip: TALLAHASSEE, FL 32311 US Title: () Delete Title: (X) Change ( ) Addition LUMPKIN, DETRIS Name: Name: SELVER, WALTER J Address: 5001 BRANDED OAKS CT. Address: 5001 BRANDED OAKS CT. City-St-Zip: TALLAHASSEE, FL 32311 US City-St-Zip: TALLAHASSEE, FL 32311 US Title: () Delete Title: ( ) Change (X) Addition FENN, OSCAR Name: Name: Address: Address: 7525 160 TRACE City-St-Zip: City-St-Zip: LIVE OAK, FL 32064 Title: () Delete Title: ( ) Change (X) Addition Name: Name: REED, VERNITA Address: Address: PO BOX 85 City-St-Zip: City-St-Zip: LIVE OAK, FL 32064

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: RONALD B. LUMPKIN RΑ 04/13/2009