

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003874

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: F.C.I. TALLAHASSEE EMPLOYEES CLUB, INC.

## Current Principal Place of Business:

501 CAPITAL CIRCLE N.E.  
TALLAHASSEE, FL 32301

## New Principal Place of Business:

## Current Mailing Address:

501 CAPITAL CIRCLE N.E.  
TALLAHASSEE, FL 32301

## New Mailing Address:

FEI Number: 59-3321123

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COLLINS, TANYA  
501 CAPITAL CIRCLE N.E.  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

SONS, VIRGINIA  
501 CAPITAL CIRCLE N.E.  
TALLAHASSEE, FL 32301 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: VIRGINIA SONS

03/20/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ANDERSON, MICHAEL  
Address: 501 CAPITAL CIRCLE N.E.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: T ( ) Delete  
Name: COLLINS, TANYA  
Address: 501 CAPITAL CIRCLE N.E.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: EVP ( ) Delete  
Name: WHALEY, GLEN  
Address: 501 CAPITAL CIRCLE N.E.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VP ( ) Delete  
Name: BENTON, MELISSA  
Address: 501 CAPITAL N.E.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: S (X) Delete  
Name: HOMES, KIMBERLY  
Address: 501 CAPITAL N.E.  
City-St-Zip: TALLAHASSEE, FL 32301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WALKER, GLENN  
Address: 501 CAPITAL CIRCLE N.E.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: T (X) Change ( ) Addition  
Name: SONS, VIRGINIA  
Address: 501 CAPITAL CIRCLE N.E.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VP (X) Change ( ) Addition  
Name: SARMIENTO, RALPH  
Address: 501 CAPITAL CIRCLE N.E.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: S (X) Change ( ) Addition  
Name: BOYATT-METCALF, NIGEL  
Address: 501 CAPITAL N.E.  
City-St-Zip: TALLAHASSEE, FL 32301

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: VIRGINIA SONS

T

03/20/2009

Electronic Signature of Signing Officer or Director

Date