

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010666

FILED
Jan 05, 2012
Secretary of State

Entity Name: TALLAHASSEE FULLER CENTER FOR HOUSING, INC.

Current Principal Place of Business:

2183 GATES DRIVE
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

PO BOX 12951
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 26-3747262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORVATH, ELIZABETH A
98 HICKORYWOOD DR.
CRAWFORDVILLE, FL 32327 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: PD
Name: FACKENDER, TOM
Address: 2183 GATES DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: VPD
Name: SKUBEL, FRANK
Address: 8117 VIBURNUM CT.
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD
Name: HORVATH, ELIZABETH A
Address: 98 HICKORYWOOD DR.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: SD
Name: ERVIN, JAMES
Address: 6245 ROLLING HILLS DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: D
Name: BARTON, BRENDA
Address: 1370 MANOR HOUSE DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: BIGGINS, PATRICK
Address: 8721 MINNOW CREEK DR
City-St-Zip: TALLAHASSEE, FL 32312

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH A. HORVATH

TD

01/05/2012

Electronic Signature of Signing Officer or Director

Date