

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Aug 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N12058** (6)

1. Corporation Name

**TALLAHASSEE HARAMBEE ARTS & CULTURAL HERITAGE CO
UNCIL, INC.**

Principal Place of Business

Mailing Address

**1732 BEECHWOOD CIR. NORTH
TALLAHASSEE FL 32301**

**1732 BEECHWOOD CIR. NORTH
TALLAHASSEE FL 32301**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/13/1985

3a. Date of Last Report
06/11/1996

2. Principal Place of Business
21 **2314 Atapha Nene**

2a. Mailing Address
26 **P. O. Box 6767**

4. FEI Number
59-0977035

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

22 City & State
23 **Tallahassee**

27 City & State
28 **Tallahassee**

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees**

24 Zip
32301

25 Country
Leon

29 Zip
32301

30 Country
Leon

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCKAY, WILMA KAY
1732 BEECHWOOD CIR. NORTH
TALLAHASSEE FL 32301**

81 Name
Beverly H. Barber

82 Street Address (P.O. Box Number is Not Acceptable)
2314 Atapha Nene

83

84 City
Tallahassee FL 85 Zip Code
32301

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☒ Change ☐ Addition

TITLE **D**
NAME **TUCKER, L. YVONNE**
STREET ADDRESS **3007 KEVIN ST**
CITY-ST-ZIP **TALLAHASSEE FL 32301**

1.1 TITLE **President**
1.2 NAME **Barbara H. Barber,**
1.3 STREET ADDRESS **2314 Atapha Nene**
1.4 CITY-ST-ZIP **Tallahassee, FL 32310**

TITLE **D**
NAME **BARBER, BEVERLY A.**
STREET ADDRESS **1888 LOG RIDGE TRAIL**
CITY-ST-ZIP **TALLAHASSEE FL**

2.1 TITLE **Vice-President**
2.2 NAME **Janie B. Reddings**
2.3 STREET ADDRESS **1460A Willow Bend Way**
2.4 CITY-ST-ZIP **Tallahassee, FL 32301**

TITLE **D**
NAME **CARR, MAE BELL**
STREET ADDRESS **2115 ROSE STREET**
CITY-ST-ZIP **TALLAHASSEE FL**

3.1 TITLE **Secretary/Treasurer**
3.2 NAME **2115 Rose Street**
3.3 STREET ADDRESS **Tallahassee, FL 32310**
3.4 CITY-ST-ZIP

TITLE **P**
NAME **MCKAY, WILMA K.**
STREET ADDRESS **1732 BEECHWOOD CIR. NORTH**
CITY-ST-ZIP **TALLAHASSEE FL 32301**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE  SIGNATURE REQUIRED  8801 8801 8801

CR2E037 (4/97)