

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17046

FILED  
Feb 28, 2005  
Secretary of State

Entity Name: THE FATHER'S HOUSE OF TALLAHASSEE, INC.

**Current Principal Place of Business:**

4909 N MONROE ST  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

4909 N MONROE ST  
TALLAHASSEE, FL 32303

**New Mailing Address:**

FEI Number: 58-2392286

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

RUDD, R L  
4909 N MONROE ST  
TALLAHASSEE, FL 32303 US

**Name and Address of New Registered Agent:**

PIFER, ROB  
2053 SHADY OAKS DR  
TALLAHASSEE, FL 32303 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: ROB PIFER

02/28/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: RUSSI, KEN  
Address: 984 PAUL THOMPSON RD  
City-St-Zip: MONTICELLO, FL 32344

Title: DV ( ) Delete  
Name: PIFER, ROB  
Address: 2053 SHADYOAKS DR  
City-St-Zip: TALLAHASSEE, FL 32303

Title: S ( ) Delete  
Name: RUDD, R L  
Address: 4909 N MONROE ST  
City-St-Zip: TALLAHASSEE, FL 32303

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: POST, JON  
Address: 770 MIDDLEBROOKS COURT  
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: S (X) Change ( ) Addition  
Name: RUSSI, KEN  
Address: 3998 FORSYTHE PARK COURT  
City-St-Zip: TALLAHASSEE, FL 32309

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROB PIFER

DV

02/28/2005

Electronic Signature of Signing Officer or Director

Date