

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