

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17198

FILED
May 10, 2005
Secretary of State

Entity Name: TALLAHASSEE AREA CONVENTION AND VISITORS BUREAU, INC.

Current Principal Place of Business:

C/O NANCY SAUNDERS
106 E JEFFERSON STREET
TALLAHASSEE, FL 32301 US

Current Mailing Address:

C/O NANCY SAUNDERS
106 E JEFFERSON STREET
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

C/O MIKE BRISTOL
106 E JEFFERSON STREET
TALLAHASSEE, FL 32301 US

New Mailing Address:

C/O MIKE BRISTOL
106 E JEFFERSON STREET
TALLAHASSEE, FL 32301 US

FEI Number: 59-2788437 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SAUNDERS, NANCY
106 E. JEFFERSON ST.
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

OBRIEN, CHRIS
106 E. JEFFERSON ST.
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: CHRIS OBRIEN

05/10/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: MORGAN, DENNIS
Address: 101 S ADAMS
City-St-Zip: TALLAHASSEE, FL 32301

Title: P () Delete
Name: BRISTOL, MIKE
Address: 106 E. JEFFERSON ST.
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: DAWS, RUSSELL
Address: 3945 MUSEUM DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: ALLEN, PACE
Address: 2121 W. TENNESSEE ST
City-St-Zip: TALLAHASSEE, FL 32304

Title: D () Delete
Name: GROSVENOR, PAT
Address: 415 N MONROE ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: BARBER, CHUCHA
Address: 350 S. DUVAL ST.
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MORGAN, DENNIS
Address: 101 S ADAMS
City-St-Zip: TALLAHASSEE, FL 32301

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

Title: T (X) Change () Addition
Name: DAWS, RUSSELL
Address: 3945 MUSEUM DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: S (X) Change () Addition
Name: COLLEY, KAREN
Address: 1215 THOMASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32303

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

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

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: MIKE BRISTOL

P

05/10/2005

Electronic Signature of Signing Officer or Director

Date