

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22232

FILED
Apr 29, 2005
Secretary of State

Entity Name: TALLAHASSEE BOWHUNTERS ASSOCIATION, INC.

Current Principal Place of Business:

4897 SPRINGHILL RD
TALLAHASSEE, FL 32305

New Principal Place of Business:

Current Mailing Address:

4897 SPRINGHILL RD
TALLAHASSEE, FL 32305

New Mailing Address:

FEI Number: 59-2916829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, KEN
4001 FORSYTHE WAY
TALLAHASSEE, FL 32309 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 () Delete
Name: CAMPBELL, KEN PRESIDE
Address: 4001 FORSYTHE WAY
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: D () Delete
Name: DENNIS, BRIAN DIRECTO
Address: 2106 WOODSTOCK LN.
City-St-Zip: TALLAHASSEE, FL 32303

Title: TD () Delete
Name: NELSON, CLIF TREASUR
Address: 6823 HILL GAIL TRAIL
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD () Delete
Name: PAUL, DAVE SECRETA
Address: 1908 SHARON RD.
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: HUTCHISON, DAN DIRECTO
Address: 5011 EASY ST.
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: MCNUTT, SCOTT DIRECTO
Address: 1815DEVRA DR
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: KROMHOUT, CLINT DIRECTO
Address: 1616 EAGLE'S LANDING BLVD. #79
City-St-Zip: TALLAHASSEE, FL 32308

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: CLIF NELSON

TD

04/29/2005

Electronic Signature of Signing Officer or Director

Date