2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28572

FILED Mar 20, 2007 Secretary of State

Entity Name: TALLAHASSEE TRUST FOR HISTORIC PRESERVATION, INC.

Current Principal Place of Business: 423 E VIRGINIA ST				New Principal Place of Business:		
TALLAHASSEE, FL 32301 US Current Mailing Address:				New Mailing Address:		
423 E VIRGINIA ST TALLAHASSEE, FL 32301 US						
FEI Number: 59-2921039 FEI Number Applied For () FEI Num				nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
WING, MICHAEL P 423 E VIRGINIA 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:						
Electronic Signature of Registered Agent			egistered Agent		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	C () [CHIN, ANDREW 1936 S MLK BLV TALLAHASSEE,	/D 32307		Title: Name: Address: City-St-Zip:	C (X) Change () Addition LEWIS, RANDY 211 JOHN KNOX ROAD, STE 105 TALLAHASSEE, FL 32303	
Title: Name: Address: City-St-Zip:	VC () I LEWIS, RANDY 211 JOHN KNOX TALLAHASSEE,			Title: Name: Address: City-St-Zip:	VC (X) Change () Addition PETERSON, TERRY 1958-B COMMONWEALTH LANE TALLAHASSEE, FL 32303	
Title: Name: Address: City-St-Zip:	DT () I PHIPPS, BENJAI PO BOX 1351 TALLAHASSEE,			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS () I PALMER, MARC 4773 CHAIRES O TALLAHASSEE,	CROSS RD.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I LANHAM, DON 1963 LAWSON F TALLAHASSEE,			Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: RANDY LEWIS C 03/20/2007