

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38836

FILED
Feb 14, 2008
Secretary of State

Entity Name: BIG BEND MODEL RAILROAD ASSOCIATION, INC.

Current Principal Place of Business:

3105 ORTEGA DR
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3392
TALLAHASSEE, FL 32315

New Mailing Address:

FEI Number: 59-3070849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANN, SHAWN
2023 GARDENBROOK LN
TALLAHASSEE, FL 32301 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: SD () Delete
Name: HEATH, LYNN
Address: 7843 TALLY ANN CT
City-St-Zip: TALLAHASSEE, FL 32311

Title: TD () Delete
Name: BOYLE, WILLIAM
Address: 2306 LIMERICK DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: PD () Delete
Name: JOHNSON, BARRETT
Address: 3105 ORTEGA DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: MILLER, SAM
Address: 3008 STILLWOOD CT
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: EASTON, GARTH
Address: 9723 BULL HEADLEY RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: VD () Delete
Name: BENSON, LARRY
Address: 1832 JEAN AVENUE
City-St-Zip: TALLAHASSEE, FL 32308

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

Title: VD (X) Change () Addition
Name: SULLENBURGER, JOHN
Address: 1832 JEAN AVENUE
City-St-Zip: TALLAHASSEE, FL 32308

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM BOYLE

TD

02/14/2008

Electronic Signature of Signing Officer or Director

Date