

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2003 8:00 am
Secretary of State

02-19-2003 90011 009 ****61.25

DOCUMENT # N40053

1. Entity Name

THE TALLAHASSEE SCIENTIFIC SOCIETY, INCORPORATED



Principal Place of Business

**FAMU-FSU COLLEGE OF ENGINEERING
2525 POTSDAMER -B206
TALLAHASSEE FL 32310-6046**

Mailing Address

**FAMU-FSU COLLEGE OF ENGINEERING
2525 POTSDAMER -B206
TALLAHASSEE FL 32310-6046**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3128863**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**EDELSON, DAVID
1107 KENILWORTH RD
TALLAHASSEE FL 32312**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

David Edelson
2/17/2003

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DT	<input type="checkbox"/> Delete
NAME	EDELSON, DAVID	
STREET ADDRESS	1107 KENILWORTH RD	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE	DV	<input checked="" type="checkbox"/> Delete
NAME	GREEN, BILL	
STREET ADDRESS	123 SOUTH CALHOUN ST.	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE	DP	<input type="checkbox"/> Delete
NAME	HALL, AL	
STREET ADDRESS	4335 SHERBORNE RD.	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GILMER, PENNY	
STREET ADDRESS	3235 ROBINHOOD RD	
CITY-ST-ZIP	TALLAHASSEE FL 32312	
TITLE	D	<input type="checkbox"/> Delete
NAME	CAIN, JOE	
STREET ADDRESS	2807 STERLING DRIVE	
CITY-ST-ZIP	TALLAHASSEE FL 32312	
TITLE	DS	<input checked="" type="checkbox"/> Delete
NAME	FISHER, RICHARD	
STREET ADDRESS	2525 POTSDAMER ST	
CITY-ST-ZIP	TALLAHASSEE FL 32310-6046	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREEN, BILL	
STREET ADDRESS	123 SOUTH CALHOUN ST	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GILMER, PENNY	
STREET ADDRESS	3235 ROBINHOOD RD	
CITY-ST-ZIP	TALLAHASSEE FL 32312	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with another like empowered.

SIGNATURE:

David Edelson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/03 406429

CR2E037 (10/02)