

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000668

FILED
Apr 21, 2008
Secretary of State

Entity Name: TALLAHASSEE CHAPTER OF THE INSTITUTE OF INTERNAL AUDITORS, INC.

Current Principal Place of Business:

ATTORNEY GENERAL'S OFFICE
COLLINS BLDG, 107 W. GAINES ST.
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10049
TALLAHASSEE, FL 323022049

New Mailing Address:

FEI Number: 59-3093907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNELL, SUSAN
OAG/ OFFICE OF INSPECTOR GENERAL
PL-01, THE CAPITOL
TALLAHASSEE, FL 323991050 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: T () Delete
Name: O'CONNELL, SUSAN
Address: OAG, PL-01 THE CAPITOL
City-St-Zip: TALLAHASSEE, FL 32399

Title: V () Delete
Name: ALLEN, STEPHANIE
Address: FDOT, 605 SUWANEE ST MS44
City-St-Zip: TALLAHASSEE, FL 32399

Title: V () Delete
Name: SGOUROS, STEPHANIE
Address: 227 N BRONOUGH ST, STE 5000
City-St-Zip: TALLAHASSEE, FL 323011329

Title: PP () Delete
Name: BOYD, LAURE
Address: OFFICE OF THE GOVERNOR, THE CAPITOL #3103
City-St-Zip: TALLAHASSEE, FL 323990001

Title: P () Delete
Name: HIXSON, DANIEL
Address: FDOT, 605 SUWANEE ST, MS44
City-St-Zip: TALLAHASSEE, FL 323990450

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: ALLEN, STEPHANIE
Address: FDOT, 605 SUWANEE ST MS44
City-St-Zip: TALLAHASSEE, FL 32399

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

Title: PP (X) Change () Addition
Name: HIXSON, DAN
Address: FDOT, 605 SUWANEE ST MS44
City-St-Zip: TALLAHASSEE, FL 32399

Title: V (X) Change () Addition
Name: MICHAEL, YU
Address: FDJJ, 2737 CENTERVIEW DR.
City-St-Zip: TALLAHASSEE, FL 323993100

Title: V () Change (X) Addition
Name: AITA, JOE
Address: FDEP, 3900 COMMONWEALTH BLVD.
City-St-Zip: TALLAHASSEE, FL 323993000

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: SUSAN O'CONNELL

T

04/21/2008

Electronic Signature of Signing Officer or Director

Date