2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# N93000005145

Entity Name: TALLAHASSEE LENDERS' CONSORTIUM, INC.

Current Principal Place of Business:

833 EAST PARK AVE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

833 EAST PARK AVE
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-3212709 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANE, LIBBY
833 EAST PARK AVE
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: D ( ) Delete
Name: PROFITT, STEVEN
Address: 1573 CLIFFORD HILL RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete
Name: GILLISPIE, KAREN
Address: 3116 CAPITAL CIR NE STE 2
City-St-Zip: TALLAHASSEE, FL 32308

Title: P ( ) Delete
Name: GARNER, DONALD II
Address: 1731 BEECHWOOD CIRCLE SOUTH
City-St-Zip: TALLAHASSEE, FL 32301

Title: VP ( ) Delete
Name: THOMPSON, SUSAN
Address: 3520 THOASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: ST ( ) Delete
Name: PELHAM, KIMBERLY
Address: 601 N MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete
Name: DANIELS, JANEIA
Address: 1943 MISSION ROAD
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: THOMPSON, SUSAN
Address: 3520 THOMASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP (X) Change ( ) Addition
Name: BASS, KAREN
Address: 902 N GADSDEN ST
City-St-Zip: TALLAHASSEE, FL 32303

Title: S (X) Change ( ) Addition
Name: DAVIS, KELLY
Address: 3072 ROYAL PALM WAY
City-St-Zip: TALLAHASSEE, FL 32309

Title: T (X) Change ( ) Addition
Name: PELHAM, KIMBERLY
Address: 601 N MONROE ST
City-St-Zip: TALLAHASSEE, FL 32303

Title: D (X) Change ( ) Addition
Name: WELLS, LAURA
Address: 2105 CAPITAL CIRCLE NE
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 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: LIBBY LANE ED 04/02/2009

Electronic Signature of Signing Officer or Director — Date