2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2009
Secretary of State

DOCUMENT# N94000000811

Entity Name: TALLAHASSEE NATURALLY, INC.

Current Principal Place of Business:

P.O. BOX 6866
TALLAHASSEE, FL 32314

New Principal Place of Business:

TURKEY SCRATCH ROAD
MONTICELLO, FL 32344

Current Mailing Address:

P.O. BOX 6866
TALLAHASSEE, FL 32314

New Mailing Address:

FEI Number: 59-3303901 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LEVALLEY, PAUL
909 STILL COURT
TALLAHASSEE, FL 32310 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: TD ( ) Delete
Name: LEVALLEY, PAUL
Address: 909 STILL COURT
City-St-Zip: TALLAHASSEE, FL

Title: PD ( ) Delete
Name: LOGAN, GRANT C
Address: 909 1/2 STILL COUNT
City-St-Zip: TALLAHASSEE, FL 32310

Title: SD ( ) Delete
Name: MORGAN, GAY WENDY
Address: 1808 CHOWKEEBIN NENE
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: LOGAN, GRANT C
Address: 909 1/2 STILL COURT
City-St-Zip: TALLAHASSEE, FL 32310

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: PAUL LEVALLEY TREA 06/30/2009

Electronic Signature of Signing Officer or Director — Date