2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2011
Secretary of State

DOCUMENT# N94000001382

Entity Name: TALL PINES CENTER, INC.

Current Principal Place of Business:

5835 OLD BETHEL ROAD
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

5835 OLD BETHEL ROAD
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 59-3233276 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HINSON, RANDALL H
4862 S. HWY 77
GRACEVILLE, FL 32440 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: CEO
Name: HINSON, CHARLIE G
Address: 5835 OLD BETHEL ROAD
City-St-Zip: CRESTVIEW, FL 32536 US

Title: S
Name: HINSON, MARILYN E
Address: 5835 OLD BETHEL ROAD
City-St-Zip: CRESTVIEW, FL 32536 US

Title: CFO
Name: HINSON, MICHAEL C
Address: 5833 OLD BETHEL ROAD
City-St-Zip: CRESTVIEW, FL 32536 US

Title: COO
Name: DRESKO, PHILIP J SR
Address: 10301 US HWY 27 UNIT 9
City-St-Zip: CLERMONT, FL 34711 US

Title: D
Name: WILLIAMS, RAYMOND E REV.
Address: 5369 HILLCREST
City-St-Zip: CRESTVIEW, FL 32539 US

Title: D
Name: DRESKO, COLLEEN M
Address: 10301 U.S. HWY 27, UNIT 9
City-St-Zip: CLERMONT, FL 34711 US

I hereby 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 all other like empowered.

SIGNATURE: CHARLIE G. HINSON CEO 03/22/2011
Electronic Signature of Signing Officer or Director Date