

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 15, 2008
Secretary of State**

DOCUMENT# N94000003004

Entity Name: TALLAHASSEE CHAMBER FOUNDATION, INC.

Current Principal Place of Business:

100 N. DUVAL ST.
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1639
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 59-3161813 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICK, SUZANNE M
100 N. DUVAL ST.
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: BROWN, MATT
Address: P. O. BOX 3606
City-St-Zip: TALLAHASSEE, FL 32315

Title: D (X) Delete
Name: DICK, SUZANNE M
Address: 100 N DUVAL ST
City-St-Zip: TALLAHASSEE, FL 32302

Title: DC (X) Delete
Name: HANNA, RANDALL
Address: 101 N. MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPRE (X) Change () Addition
Name: DICK, SUZANNE M
Address: P. O. BOX 1639
City-St-Zip: TALLAHASSEE, FL 32302

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

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: SUZANNE M. DICK

PRES

04/15/2008

Electronic Signature of Signing Officer or Director

_____ Date