4/11

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State
04-11-2001 90026 049 ****61.25

45427

DOCUMENT # N95000003110

1. Entity Name

TALLAHASSEE NORTHSIDE ROTARY CLUB, INC.

Principal Place of Business	Mailing Address
% THE WHARF 1480 TIMBERLANE ROAD TALLAHASSEE FL 32312 US	PO BOX 4068 TALLAHASSEE FL 32315

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7210900 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BREWSTER, JAMES R
547 N MONROE ST
SUITE 203 THE WALKER BUILDING
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name Sheryl R. Singletary

Street Address (P.O. Box Number is Not Acceptable) 1475 Bethel Church Rd

City Tallahassee **FL** Zip Code 32304

8. 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 Sheryl R Singletary Sheryl R Singletary, President 05 APR 2001
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LEINBACK, BRUCE 1669 MAHAN CENTER BLVD. TALLAHASSEE FL 32308	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Sheryl R. Singletary 1475 Bethel Church Rd Tallahassee, FL 32304	☐ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SHERRON, GENE 6131 HEARTLAND CIRCLE TALLAHASSEE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-President Jayce Dove 6734 Chevy Way Tallahassee, FL 32311	☐ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SPOOKER, LISA 7164 HEARTLAND CIRCLE TALLAHASSEE FL 32312	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~Treasurer~~ Secretary John McBride 203 W. 4 Ave Tallahassee, FL 32303	☐ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD METCALF, DAVID 1677 MAHAN CENTER BLVD. TALLAHASSEE FL 32308	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Charlie Minter 1733 River Birch Hollow Tallahassee, FL 32308	☐ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sheryl R Singletary Sheryl R Singletary President 05 APR 2001 (850) 386-3203
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #