

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000092

FILED
Apr 30, 2006
Secretary of State

Entity Name: ISKCON OF TALLAHASSEE, INC.

Current Principal Place of Business:

1323 NYLIC STREET
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

1323 NYLIC STREET
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 59-3449571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, DAVID K
1323 NYLIC ST.
TALLAHASSEE, FL 32304 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: PD () Delete
Name: WALKER, DAVID K
Address: 1323 NYLIC STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: SD () Delete
Name: DA COSTA, ANTONIO
Address: 206 SINCLAIR ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: BENSON, DEBBIE J
Address: 1409 GREEN ST.
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: MOLNER, KIM
Address: 1810 NW 131ST ST
City-St-Zip: GAINESVILLE, FL 32669

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID K. WALKER

PD

04/30/2006

Electronic Signature of Signing Officer or Director

Date