


FILE NOW: FILING FEE IS \$61.25

**FILED**  
Feb 25, 1999 8:00 am  
Secretary of State

02-25-1999 90011 010 \*\*\*\*61.25

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<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # N96000004549</b>					
1. Corporation Name <b>TALLAHASSEE AUBURN CLUB, INC.</b>					
Principal Place of Business <b>830 N DAWSON ST THOMASVILLE HG 31792 US</b>			Mailing Address <b>830 N DAWSON ST THOMASVILLE GA 31792 US</b>		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>08/30/1996</b>	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
23	Zip	28	Zip	6. Election Campaign Financing <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24	Country	29	Country	Trust Fund Contribution	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>DAVIS, L N 2040 NW 57TH PL GAINESVILLE FL 32653</b>				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	<b>P</b>	<b>DAVIS, L</b>	<b>830 N DAWSON ST THOMASVILLE GA 31792</b>				
	<input type="checkbox"/>	DELETE					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	<b>VP</b>	<b>SIDER, KEVIN</b>	<b>2503 H OLD BAINBRIDGE RD TALLAHASSEE FL 32303</b>				
	<input type="checkbox"/>	DELETE					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
	<b>VPD</b>	<b>GADD, CHRIS</b>	<b>3062 HAWKS GLEN TALLAHASSEE FL 32312</b>				
	<input checked="" type="checkbox"/>	DELETE					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
	<b>VPD</b>	<b>DAVIS, NICK</b>	<b>830 NORTH DAWSON STREET THOMASVILLE GA 32792</b>				
	<input type="checkbox"/>	DELETE					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
	<b>T</b>	<b>GOLDBERG, ALISA</b>	<b>7128 UPLAND GLADE TALLAHASSEE FL 32316</b>				
	<input type="checkbox"/>	DELETE					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
	<b>TD</b>	<b>PICKRON, RITCHIE</b>	<b>1742 RIVER BIRCH HOLLOW TALLAHASSEE FL 32308</b>				
	<input type="checkbox"/>	DELETE					

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/99 352-379-7606

Date Daytime Phone #

CR2E037 (1/98)