

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005509

FILED
Feb 20, 2008
Secretary of State

Entity Name: THE FAMILY TREE: A LESBIAN, GAY, BISEXUAL COMMUNITY CENTER, INC.

Current Principal Place of Business:

310 BLOUNT STREET STE 205
SUITE #205
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 38477
TALLAHASSEE, FL 32315 US

New Mailing Address:

FEI Number: 59-3411233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANRIPER, JAMES
2024 TED HINES DR.
TALLAHASSEE, FL 32308 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: CD () Delete
Name: VANRIPER, JIM
Address: 2024 TED HINES DR
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: ROBERTSON, MYLES
Address: 2024 TED HINES DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD (X) Delete
Name: ANWAY, PAUL
Address: 1110 LASSWADE DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D (X) Delete
Name: CHAMPION, MIKE
Address: 2913 GERALD DR.
City-St-Zip: TALLAHASSEE, FL 32310

Title: D (X) Delete
Name: MUTZ, MARGEAUX
Address: 1132 E TENNESSEE ST
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Delete
Name: RICKER, JACKIE
Address: 1210 BRECKENRIDGE DR
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: LANGLEY, GRETA
Address: 724 DEER RUN ROAD
City-St-Zip: HAVANNA, FL 32333

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

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

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: JAMES A VANRIPER

CD

02/20/2008

Electronic Signature of Signing Officer or Director

Date