

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004034

FILED
Jan 26, 2007
Secretary of State

Entity Name: KEEP TALLAHASSEE-LEON COUNTY BEAUTIFUL, INC.

Current Principal Place of Business:

3212 BEAUMONT DR
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

P O BOX 191
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 31-1528968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, DIANA
3212 BEAUMONT DRIVE
TALLAHASSEE, FL 32309 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: DT () Delete
Name: DORSEY, FRANK
Address: 401 E. VIRGINIA ST.
City-St-Zip: TALLAHASSEE, FL 32301

Title: C () Delete
Name: HOPKINS, CHARLES
Address: SUNTRUST 3522 THOMASVILLE RD, 5TH FLOOR
City-St-Zip: TALLAHASSEE, FL 32308

Title: ED () Delete
Name: HANSON, DIANA
Address: P. O. BOX 191
City-St-Zip: TALLAHASSEE, FL 32302

Title: VC () Delete
Name: HORNE, JESSILYN
Address: COCA COLA 2050 MARYLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32303

Title: S () Delete
Name: WILLIAMS, JOHANNA
Address: MARPAN 215 EAST PERSHING STREET
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: C (X) Change () Addition
Name: BARRETT, PEARCE
Address: P. O. BOX 12727
City-St-Zip: TALLAHASSEE, FL 32317

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

Title: VC (X) Change () Addition
Name: WILLIAMS, JOHANNA
Address: 215 EAST PERSHING STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: S (X) Change () Addition
Name: SCHROWANG, MELANIE
Address: 7833 MCCLURE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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: DIANA HANSON

ED

01/26/2007

Electronic Signature of Signing Officer or Director

Date