200	1 UNIFORM BUS	INESS REPO	RŤŰ(l	JBR)	1/2	FIL		
DOCUMENT # N9700004484 1. Entity Name					Feb 27, 2001 8:00 am Secretary of State			
TALLAH	IASSEE 25, INC.					01-23-2001 9005		
Principal Plan	ce of Business	Mailing Address			-{			
P.O. BOX 11293		P O BOX 11293				_		
TALLAHASSE	E FL 32302	TALLAHASSEE FL 32302						
	(Ja)						())	
2. Principal Place of Business		3. Mailing Address			DO NOT WRITE IN THIS SPACE			
Suite, Apt. #, etc"		Suite, Apt. #, etc.						
City & State		City & State			4. FEI Numbe	["] 59-3444030	Applied For Not Applicable	7
Zip Country		Zip	Çountry	,	5. Certificate of Status Desired			
	6. Name and Address of Curren	t Registered Agent			7. Name and	Address of New Registered /		1
	ericani de la composició de la composici	Nan		lame				. i =
SNIFFEN, ROBERT J		<i>(</i> *	S	itreet Address	P.O. Box Number is Not Acceptable)			
2544 BLAIRSTONE PINES DR TALLAHASSEE FL 32301							. <u> </u>	
		City		ity	FL Zip Code		Zip Code].
8. The above	e named entity submits this statement f	or the purpose of changing its r	egistered c	office or registe	ered agent, or bot	h, in the state of Florida.		1
SIGNATURE Signature, typed or printed name of registered ager FILE NOW: FEE IS \$61.25		9. Election Campaign Financing \$5.0			00 May Be Make Check Payable to Department of State			
10.	OFFICERS AND D	IRECTORS	11.		ADDITIONS/CHA	ANGES TO OFFICERS AND DIF	RECTORS IN 10	4
TITLE	EO	Delete		ون	esiden)		Change Addition	<u>§</u>
NAME STREET ADDRESS	TEMPLETON, TIM 114 MEETING STREET	7	NAME STREET AL	DORESS 191	est Usido By Chats	worth Way	(\tilde{h})	5037 (10/00)
CITY-ST-ZIP	TALLAHASSEE FL 32301	<u> </u>		ZIP T				
TITLE NAME	PD Rizzo, Pete	Ociete	TITLE NAME	Ra	y Burke 4 Nanicol	Vice President	Change Addition	R
STREET ADDRESS	1829 CRANE DRIVE	•	STREET AL	DORESS		FL 32303	(0)	Ϊ
CITY-ST-ZIP	VPD - ~ 32303		CITY-ST-	-		<u>/ </u>	Change Addition	
MAME NAME	LAYMAN, KELLY	Delete	NAME				Change Addition	
STREET ADDRESS	112 MEETING STREET		STREET AC	DORESS	Tallaharra	Landing Blod, #47	(1)	
CITY-ST-ZIP	TALLAHASSEE FL 32301	To the	CHY-ST-			e, FL 32308	Change Addition	-
name	BOLTON, JODI	Delete	TITLE NAME	10	asurec ris Wallat	0 1	The Charles	
STREET ADDRESS	3405 WHITNEY COURT		STREET AD	DRESS 6	oo victory	Gorden UN E40	(D/.	
CITY-ST-ZIP	TALLAHASSEE FL 32308	V Delete	CITY-ST-		Tallahasi etary	see 1=L 32301	Change Addition	-
NAME	WOODWARD, MAYO	X Delecte	NAME	−হ	rechanie .	smith	T overige	
STREET ADDRESS CITY-ST-ZIP	1012 MICCOSUKEE RD		STREET AD CITY-ST-2	DRESS 2	17 Parkle	now ar	(\mathbf{U})	
TITLE	TALLAHASSEE FL 32303	Delete	TITLE		1911an assee	, Fi 32301	Change Addition	1
NAME		Koure	NAME	ļ				}
STREET ADDRESS CITY-ST-ZIP			STREET AD		•			}

12. I hereby certify that the information supplied with this liting 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 AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: Date Daytime Phone # 1