## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # N97000004551** 

1. Entity Name

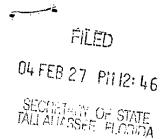
TALLAHASSEE FOUNDATION FOR LEARNING AND SUCCESS INCORPORATED



Principal Place of Business

641 MCDONNELL DRIVE TALLAHASSEE, FL 32310 Mailing Address

641 MCDONNELL DRIVE TALLAHASSEE, FL 32310





02172004 No Chg-NP

CR2E037 (10/03)

4. FEI Number 59-3460708

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KOELEMIJ, JOHN J 641 MCDONNELL DRIVE TALLAHASSEE, FL 32310

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

8. 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—I am familiar with, and accept the obligations of registered agent.  12/26/0401022003 **61.25						
SIGNATURE						
	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Finan Trust Fund Contribution.	cing \$5.00  Added to			
10.	OFFICERS AND DIRE	CTORS		V. 19.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROLLINS, STEVE DR 312 STONE BLDG TALLAHASSEE, FL 323064076		Entert Wiles Entert with Entert with			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KOELMIJ, KAREN 641 MCDONNELL DRIVE TALLAHASSEE, FL 32310					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCCLELLAND, LISA TRI MAIN OFFICE-103 UNIT A TALLAHASSEE, FL 32307			DO NOT	WRITE	the service edge
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIMMEL, DAVID 2825 MUNICIPAL WAY TALLAHASSEE, FL 32304			IN THIS	SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WARNER, JOYCE P 641 MCDONNELL DR TALLAHASSEE, FL 32310					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. 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 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 arration with an address, with all other like empowered.						