

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002340

FILED
Aug 08, 2007
Secretary of State

Entity Name: THE SCOTTISH GAMES COUNCIL, INC.

Current Principal Place of Business:

P.O. BOX 86
TALLAHASSEE, FL 32302

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 86
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 59-3521889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

OAKLEY, JOYCE C
801 E 2ND STREET
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

THOMAS, GLENN E
2600 CENTENNIAL PLACE
100
TALLAHASSEE, FL 32308 US

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: GLENN E. THOMAS

08/08/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OAKLEY, JOYCE C
Address: 801 E 2ND STREET
City-St-Zip: PANAMA CITY, FL 32401

Title: VD () Delete
Name: ERIC, KING
Address: 6119 OX BOTTOM MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD () Delete
Name: MAYHALL, CAROL
Address: 214 PARKBROOK CIRCLE
City-St-Zip: TALLAHASSEE, FL 32301

Title: TD (X) Delete
Name: OWEN, ROBERT
Address: 1519 BLOCKFORD CT E.
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KING, ERIC
Address: 6119 OX BOTTOM MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VD (X) Change () Addition
Name: LINDSEY, KIEFF
Address: P.O. BOX 751
City-St-Zip: QUNCY, FL 32353

Title: SD (X) Change () Addition
Name: ATHERTON, PATTY
Address: 380 ROBROY TRAIL
City-St-Zip: TALLAHASSEE, FL 32312

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: ERIC KING

PD

08/08/2007

Electronic Signature of Signing Officer or Director

Date