

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002340

FILED  
Mar 30, 2009  
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 ( )

**Name and Address of Current Registered Agent:**

THOMAS, GLENN E  
2600 CENTENNIAL PLACE  
100  
TALLAHASSEE, FL 23208 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: PD ( ) Delete  
Name: KING, ERIC  
Address: 6119 OX BOTTOM MANOR DRIVE  
City-St-Zip: TALLAHASSEE, FL 23212

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: LINDSEY, KEIFFER (JR) W  
Address: 1609-B WILLOW BEND WAY  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VP (X) Change ( ) Addition  
Name: BALDWIN, KIMBERLY  
Address: P.O. BOX 15811  
City-St-Zip: TALLAHASSEE, FL 32317

Title: TRES (X) Change ( ) Addition  
Name: AULPH, JAYNE  
Address: 295 DEER TRAIL  
City-St-Zip: HAVANA, FL 32333

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: KEIFFER W LINDSEY JR

PRES

03/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date