## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000004969

FILED Feb 27, 2009 Secretary of State

Entity Name: LEGAL ADMINISTRATORS ASSOCIATION OF TALLAHASSEE, INC.

Current Principal Place of Business: New Principal Place of Business:

215 S MONROE ST
204 S. MONROE STREET
2ND FL, ATTN PCHON
TALLAHASSEE, FL 32301
TALLAHASSEE, FL 32301

Current Mailing Address:

215 S MONROE ST 204 S. MONROE STREET 2ND FL, ATTN PCHON TALLAHASSEE, FL 32301

TALLAHASSEE, FL 32301

FEI Number: 59-3530266 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

**New Mailing Address:** 

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

CAPPS, CORINNE

1983 CENTRE POINTE., SUITE 200

TALLAHASSEE, FL 32308 US

CHILDS, CHRISTINE
2010 DELTA BLVD.
TALLAHASSEE, FL 32303

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: CHRISTINE CHILDS 02/27/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SMITH, PEGGY
 Name:

 Address:
 301 S. BRONOUGH STREET, 200
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

Name: CHIN, PATRICIA Name: ROSS, ANN

Address: 215 SOUTH MONROE STREET 2ND FLOOR Address: 204 S. MONROE STREETT City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301

Title: S () Delete Title: S (X) Change () Addition

Name: CHILDS, CHRISTINE Name: DAVIS, ELIZABETH

 Address:
 115 N CALHOUN ST
 Address:
 215 S. MONROE STREET; STE 815

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 TALLAHASSEE, FL 32301

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: ANN ROSS T 02/27/2009