

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005840

FILED
Apr 28, 2006
Secretary of State

Entity Name: THE TALLAHASSEE TRAILBLAZERS INC.

Current Principal Place of Business:

9755 WYNTREE LANE
TALLAHASSEE, FL 32317

New Principal Place of Business:

Current Mailing Address:

9755 WYNTREE LANE
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-3537848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHO, TERESA
9755 WYNTREE LANE
TALLAHASSEE, FL 32317 US

Name and Address of New Registered Agent:

SANCHO, TERESA R
9755 WYNTREE LANE
TALLAHASSEE, FL 32317 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: TERESA R SANCHO

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANCHO, TERESA R
Address: 9755 WYNTREE LANE
City-St-Zip: TALLAHASSEE, FL 32317

Title: TD () Delete
Name: CLARK, JANICE
Address: 2648 AUGUSTINE CREEK TR
City-St-Zip: TALLAHASSEE, FL 32311

Title: VPD () Delete
Name: GURLEY, ANITA
Address: 2664 PINENOLL DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

Title: S () Delete
Name: CORBETT, JAYE M
Address: 313-F MABRY STREET
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TERESA R SANCHO

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date