

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90217 002 ****61.25

DOCUMENT # N98000006247

1. Entity Name
ST. JOHN'S BOOKSTORE, INC.



Principal Place of Business
**131 NORTH CALHOUN ST.
TALLAHASSEE, FL 32301**

Mailing Address
**131 NORTH CALHOUN ST.
TALLAHASSEE, FL 32301**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FCI Number
59-3540760

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

6. Name and Address of Current Registered Agent

**TALIAFERRO, MARCIA
131 NORTH CALHOUN STREET
TALLAHASSEE, FL 32301**

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.

SIGNATURE

Signature, typed or printed name of registered agent and date 7 applies.

(NOTE: Registered Agent's signature required when reappointing)

DATE

FILE NOW FEES \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KRAN, JANE 131 NORTH CALHOUN STREET TALLAHASSEE, FL 32301 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WOLFE, WALTER 131 NORTH CALHOUN STREET TALLAHASSEE, FL 32301 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Joline Groot 131 N. Calhoun St. Tallahassee FL 32301 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BROCK, SUZI 131 NORTH CALHOUN STREET TALLAHASSEE, FL 32301 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, VAN 131 NORTH CALHOUN STREET TALLAHASSEE, FL 32301 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TALIAFERRO, MARCIA 131 NORTH CALHOUN STREET TALLAHASSEE, FL 32301 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERKINS, VIRGINIA 131 NORTH CALHOUN STREET TALLAHASSEE, FL 32301 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 517, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marcia Taliaferro

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-03

850-222-8814

Date

Certified Phone #

CR2E037 (10/02)