

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004136

FILED
Mar 27, 2009
Secretary of State

Entity Name: BUCKHEAD HOMEOWNERS' ASSOCIATION OF TALLAHASSEE, INC.

Current Principal Place of Business:

2768 W HANNON HILL DRIVE
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

2768 W HANNON HILL DRIVE
TALLAHASSEE, FL 32309 US

New Mailing Address:

FEI Number: 59-3587224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THRASHER, ELWIN R III
908 N. GADSDEN ST.
TALLAHASSEE, FL 32303 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: P () Delete
Name: LESTER, JOHN
Address: 2752 WEST HANNON HILL DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: NIEWENHOUS, SUE
Address: 4542 HEDGEWOOD DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: S () Delete
Name: MEARS, NORM
Address: 4550 HEDGEWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: PARKER, RANDY
Address: 4500 HEDGEWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: FUCHS, RICHARD
Address: 4748 HEDGEWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: T () Delete
Name: STAFFORD, J. KENNETH
Address: 2768 WEST HANNON HILL DR
City-St-Zip: TALLAHASSEE, FL 32309

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:

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 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: J. KENNETH STAFFORD

T

03/27/2009

Electronic Signature of Signing Officer or Director

Date