

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90059 004 ***150.00

DOCUMENT # P94000070047	
1. Entity Name 770 TAMALPAIS DRIVE INC.	

Principal Place of Business 1801 HERMITAGE BLVD. SUITE 600 TALLAHASSEE, FL 32308 US	Mailing Address 1801 HERMITAGE BLVD. SUITE 600 TALLAHASSEE, FL 32308 US
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24017997

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02132004 Chg-P CR2E034 (10/03)

4. FEI Number 59-3303793	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
TODD, DAVID E 1801 HERMITAGE BLVD SUITE 100 TALLAHASSEE, FL 32308		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DECOSTA, LALER 3424 PEACHTREE ROAD NE #800 ATLANTA, GA 30326 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WARRIOR, DEXTER B. 3424 PEACHTREE RD., NE, STE. 800 ATLANTA, GA 30326 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT TRIVERS, LISA K 3424 PEACHTREE ROAD NE #800 ATLANTA, GA 30326 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NEWMARK, DEBBIE J. 3424 PEACHTREE RD., NE, STE. 800 ATLANTA, GA 30326 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCKEAN, THOMAS 3424 PEACHTREE ROAD NE #800 TALLAHASSEE, FL 32308 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT LATHEN, LORI Q. 3424 PEACHTREE RD., NE, STE. 800 ATLANTA, GA 30326 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVAS SMITH, JEFFREY L 1801 HERMITAGE BLVD. TALLAHASSEE, FL 32308 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENNETT, DOUGLAS W 1801 HERMITAGE BLVD #600 TALLAHASSEE, FL 32308 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BURGI-SANDELL, KATHLEEN 3424 PEACHTREE ROAD NE #800 ATLANTA, GA 30326 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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)(i), 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 607, 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: <u>Debbie J. Newmark</u>	Debbie J. Newmark	02/17/04	404-846-1300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #