

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000090275

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: TALLAHASSEE LAND MANAGEMENT, INC.

## Current Principal Place of Business:

217 JOHN KNOX RD.  
TALLAHASSEE, FL 32303

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 4288  
TALLAHASSEE, FL 32315

## New Mailing Address:

FEI Number: 59-3538246

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUFORD, A. LEWIS III  
217 JOHN KNOX RD.  
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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: BUFORD, ALBERT L JR  
Address: 217 JOHN KNOX RD.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: DST ( ) Delete  
Name: BUFORD, A. LEWIS III  
Address: 217 JOHN KNOX RD.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete  
Name: WILKINSON, BEN H JR  
Address: 217 JOHN KNOX RD  
City-St-Zip: TALLAHASSEE, FL 32303

Title: V ( ) Delete  
Name: PARKER, R. BRADFORD  
Address: 217 JOHN KNOX RD  
City-St-Zip: TALLAHASSEE, FL 32303

## 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. LEWIS BUFORD III

DST

02/26/2009

Electronic Signature of Signing Officer or Director

Date