

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V63851

FILED
Feb 03, 2010
Secretary of State

Entity Name: FLEA MARKET TALLAHASSEE, INC.

Current Principal Place of Business:

5353 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32305 US

New Principal Place of Business:

Current Mailing Address:

5353 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32305 US

New Mailing Address:

FEI Number: 59-3143348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHADDIX, STEVEN L
1275 BEVILLE RD
DAYTONA BCH, FL 32119 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: D
Name: SHADDIX, WILLIAM O II
Address: 1 DEER MOSS TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: GORDON, SHARON S
Address: 7611 TIMBERLY CT.
City-St-Zip: MCLEAN, VA 22102

Title: D
Name: FOX, SHARLENE S
Address: 686 FERNCLIFF DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: D
Name: SHADDIX, MADELINE E
Address: 6 HOMAN TERR.
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VPD
Name: SHADDIX, WILLIAM S
Address: 2130 OLD DAYTONA RD.
City-St-Zip: DAYTONA BEACH, FL 32128

Title: PD
Name: SHADDIX, STEVEN L
Address: 12888 S. E. HWY 441
City-St-Zip: OCALA, FL 34420

I hereby 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 all other like empowered.

SIGNATURE: SHARLENE S. FOX

D

02/03/2010

Electronic Signature of Signing Officer or Director

_____ Date