

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000005241

**Entity Name:** CAPITAL CIRCLE COMMERCE CENTER ASSOCIATION, INC.

**Current Principal Place of Business:**

315 BRIARCLIFF DRIVE  
THOMASVILLE, GA 31792

**Current Mailing Address:**

315 BRIARCLIFF DRIVE  
THOMASVILLE, GA 31792 US

**FEI Number: 56-2597854**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DAVIS, SHANN L  
500 CAPITAL CIRCLE, SE  
SUITE A-1  
TALLAHASSEE, FL 32301 US

*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

**Officer/Director Detail :**

Title D  
Name DAVIS, SHANN L  
Address 315 BRIARCLIFF DRIVE  
City-State-Zip: THOMASVILLE GA 31792

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

**SIGNATURE: SHANN DAVIS**

**MANAGER**

**01/22/2023**

Electronic Signature of Signing Officer/Director Detail

Date