

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000008669

Entity Name: TALLAHASSEE DUPLICATE BRIDGE CLUB, INC.

Current Principal Place of Business:

1400 N MONROE ST
TALLAHASSEE, FL 32303

Current Mailing Address:

1400 N MONROE ST
TALLAHASSEE, FL 32303 US

FEI Number: 23-7355191

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAPS, MARC E
2058 W FOREST DR
TALLAHASSEE, FL 32303 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 DIRECTOR
Name WALLACE, KELVIN
Address 146 MARIA DEL CARMÉ LANE
City-State-Zip: WAKULLA SPRINGS FL 32327

Title T
Name LABAT, JOE
Address 156 LOVE RIDGE CT
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name JOANOS, NICHOLAS
Address 2013 MORNING DOVE RD
City-State-Zip: TALLAHASSEE FL 32312

Title D
Name POLANGIN, RICHARD
Address 1300 N. DUVAL ST.
City-State-Zip: TALLAHASSEE FL 32303

Title VP
Name STILLWELL, JOYCE
Address 2905 DONAU COURT
City-State-Zip: TALLAHASSEE FL 32309

Title DIRE
Name LITTLE, DEVERLE
Address 3931 MEANDERING LANE
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name COLLINS, CYNDI
Address 3005 WINDY HILL LANE
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name BOISVERT, PAUL
Address 622 CHANCEY LANE
City-State-Zip: TALLAHASSEE FL 32308

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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: JOE LABAT

TREASURE

04/01/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name TOLLIVER, VERONIQUE
Address 207 BLUE RIDGE DRIVE
City-State-Zip: CLEMSON SC 29631

Title DIRECTOR
Name GERATO, ERASMO
Address 903 HILL ROOST ROAD
City-State-Zip: TALLAHASSEE FL 32312