

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40053

Entity Name: THE TALLAHASSEE SCIENTIFIC SOCIETY, INCORPORATED**Current Principal Place of Business:**702 MICCOSUKEE RD
TALLAHASSEE, FL 32308-4928**Current Mailing Address:**PO BOX 1163
TALLAHASSEE, FL 32302 US**FEI Number:** 59-3128863**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DUBEN, ANTHONY J
702 MICCOSUKEE RD
TALLAHASSEE, FL 32308-4928 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:** ANTHONY J DUBEN

03/02/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BRIGHTMAN, RICHARD
Address 119 S. MONROE ST, STE 300
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name WOOD, DON MR.
Address 110 DIXIE DRIVE, #E4
City-State-Zip: TALLAHASSEE FL 32304

Title DIRECTOR
Name TEEHAN, WILLIAM
Address 2022 CHOWKEEBIN NENE
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name ZIMMERMAN, CAROL
Address 1045 LONGSTREET DR.
City-State-Zip: TALLAHASSEE FL 32311

Title DIRECTOR
Name CLAUDIUS, MUNDOMA DR
Address 813 JETTY AVENUE
City-State-Zip: QUINCY FL 32351

Title PAST PRESIDENT
Name HENDERSON, ROBERT K
Address 497 STONE HOUSE RD
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name BOERNER, BARRY
Address 3520 CLIFDEN DRIVE
City-State-Zip: TALLAHASSEE FL 32309

Title VP
Name MADDOX, KERRY
Address 2074 W FOREST DR
City-State-Zip: TALLAHASSEE FL 32303

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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: ANTHONY J DUBEN**TREASURER**

03/02/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name BRYAN, DANA
Address 2894 HADLEY RD
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name DAWSON, GEORGE DR.
Address 1615 SEMINOLE DR
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name ENGSTROM, TODD DR.
Address 309 CARR LANE
City-State-Zip: TALLAHASSEE FL 32312

Title TREASURER
Name DUBEN, ANTHONY J
Address 702 MICCOSUKEE RD
City-State-Zip: TALLAHASSEE FL 32308-4928

Title DIRECTOR
Name REAMS, RENEE DR.
Address 127 DYSON PHARMACY BUILDING
City-State-Zip: TALLAHASSEE FL 32307

Title DIRECTOR
Name DATZ, AMY
Address 1130 CRESTVIEW AVE
City-State-Zip: TALLAHASSEE FL 32303