

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004034

Entity Name: KEEP TALLAHASSEE-LEON COUNTY BEAUTIFUL, INC.**Current Principal Place of Business:**3212 BEAUMONT DR
TALLAHASSEE, FL 32309**Current Mailing Address:**P O BOX 191
TALLAHASSEE, FL 32302**FEI Number: 31-1528968****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HANSON, DIANA
3212 BEAUMONT DRIVE
TALLAHASSEE, FL 32309 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	DT
Name	DORSEY, FRANK
Address	1607 VILLAGE SQUARE BOULEVARD SUITE 8
City-State-Zip:	TALLAHASSEE FL 32309

Title	CHAIRMAN
Name	GRASS, SARALYN
Address	603 W. GAINES #7
City-State-Zip:	TALLAHASSEE FL 32304

Title	ED
Name	HANSON, DIANA
Address	P. O. BOX 191
City-State-Zip:	TALLAHASSEE FL 32302

Title	VICE CHAIR
Name	BERGSTROM, DEBBIE
Address	P O BOX 191
City-State-Zip:	TALLAHASSEE FL 32302

Title	S
Name	TRUSSELL, MARIANNE
Address	P O BOX 191
City-State-Zip:	TALLAHASSEE FL 32302

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: DIANA HANSON**EXECUTIVE DIRECTOR****01/12/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date