

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720422

FILED
Jan 11, 2005
Secretary of State

Entity Name: BOYS & GIRLS CLUB OF ALACHUA COUNTY, INC.

Current Principal Place of Business:

2700 NW 51ST ST
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 532
GAINESVILLE, FL 32602 US

New Mailing Address:

FEI Number: 59-6002181 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BLANCHARD, KEITH
2700 NW 51ST STREET
GAINESVILLE, FL 32601 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

OFFICERS AND DIRECTORS:

Title: PP () Delete
Name: DANIELS, ROLAND
Address: 3737 N. MAIN STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: PD () Delete
Name: WILSON, DAVID
Address: 2199 SW 78TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607

Title: PED () Delete
Name: JONES, TONY
Address: 721 NW 6TH STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: TD () Delete
Name: ROBINSON, PAM
Address: 494 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

Title: SD () Delete
Name: WALKER, MARK
Address: 804 NW 43 ST.
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP (X) Change () Addition
Name: WILSON, DAVID
Address: 2199 SW 78TH TERRACE
City-St-Zip: GAINESVILLE, FL 32609 32

Title: PD (X) Change () Addition
Name: DANIELS, ROLAND
Address: 3737 N. MAIN STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: GENARRO, JOSEPH
Address: 4132 NW 13TH AVE.
City-St-Zip: GAINESVILLE, FL 32606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KEITH BLANCHARD

Electronic Signature of Signing Officer or Director

CPO

01/11/2005

_____ Date