2000 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:

FILED **DOCUMENT # 721590** Apr 28, 2000 8:00 am 1. Entity Name **Secretary of State** GAINESWOOD CONDOMINIUM ASSOCIATION, INC. 04-28-2000 90023 045 ****61.25 Principal Place of Business Mailing Address 1717 NW 23RD AVE. 1717 NW 23RD AVE. GAINESVILLE FL 32605 GAINESVILLE FL 32605-3082 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt, #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-1397211 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent John Gribbin Street Address (P.O. Box Number is Not Acceptable) HARRELL, VICTOR 1717 NW 23 AVE STE 3C **GAINESVILLE FL 32605** Zip Code 32005 City 8. 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 X DATE (NOTE: Registered Agent signature required when reinstating) rinted name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. D TITLE ☐ Change TD Delete TITLE Durrance, Jan GRIBBIN, JOHN NAME NAME 1717 Now 23rd Ave 6A STREET ADDRESS STREET ADDRESS 1717 NW 23RD AVE, 5F Gamesville, FL 32605 CITY-ST-ZIE CITY-ST-ZIP **GAINESVILLE FL 32605** ☐ Change **Addition** Delete TITLE TITLE Moyar, Margaret 1717 Now 22rd Ave 20 NAME WATSON-GREEN, PEGGY NAME STREET ADDRESS STREET ADDRESS 1717 NW 23 AVE STE 3E Camesville, FL 32605 CITY-ST-7IP CITY-ST-ZII GAINESVILLE FL 32605 D Fisher, Waldo - Addition M Deleter TITLE AD. NAME DURRANCE, JOHN NAME 1717 NW 23rd Ave 1C STREET ADDRESS STREET ADDRESS 1717 NW 23 AVE 5A Gainesville, FL 32605 CITY-ST-2IP CITY-ST-ZIP GAINESVILLE FL 32605 ☐ Change N Delete Addition 2 TITLE TITI F Pierson, K. Kendall 1717 NW 23nd Aue NAME NAME HARRELL, VICTOR STREET ADDRESS STREET ADDRESS 1717 NW 23 RD AVE STE 3C CITY-ST-ZIP CITY-ST-ZIE Gaineson We FL 32605 **GAINESVILLE FL 32605** ☐ Delete TITLE **Addition** singley, Edward TITLE 1719 NW 23VD Ave #PHE NAME NAME DELANO, VIRGINIA STREET ADDRESS STREET ADDRESS 1719 NW 23RD AVE, 5C CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL 32605 ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME **NELSON. JUDITH** STREET ADDRESS STREET ADDRESS 1719 NW 23RD AVE, 2F CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL 32605 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if

Q

Date

Daytime Phone #