

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90390 004 ****61.25

DOCUMENT # 721590

1. Entity Name

GAINESWOOD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1717 NW 23RD AVE
 GAINESVILLE, FL 32605

Mailing Address

1717 NW 23rd Ave
 GAINESVILLE, FL 32605

2. Principal Place of Business

1715 NW 23RD Ave

Suite, Apt. #, etc.

3. Mailing Address

1715 NW 23RD Ave

Suite, Apt. #, etc.

City & State

Gainesville, FL

City & State

Gainesville, FL

4. FEI Number

59-1397211

Applied For

Not Applicable

Zip

32605

Country

Alachua

Zip

32605

Country

Alachua

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

A0068297

6. Name and Address of Current Registered Agent

HARRELL, VICTOR
 1717 NW 23rd Ave Apt 3C
 Gainesville, FL

7. Name and Address of New Registered Agent

Name Margaret B. Moyar

Street Address (P.O. Box Number is Not Acceptable)

1717 NW 23rd Ave, 2D

City

Gainesville, FL

FL

Zip Code 32605

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

Margaret B. Moyar

4/26/01

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
 FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

TITLE DT
 NAME GRIBBIN, JOHN ☒ Delete
 STREET ADDRESS 1717 NW 23rd Ave, 5F
 CITY-ST-ZIP Gainesville, FL 32605

TITLE D
 NAME WATSON-GREEN, PEGGY ☒ Delete
 STREET ADDRESS 1717 NW 23rd Ave, 3E
 CITY-ST-ZIP Gainesville, FL 32605

TITLE VD
 NAME Durrance, John ☒ Delete
 STREET ADDRESS 1717 NW 23rd Ave, 5A
 CITY-ST-ZIP Gainesville, FL 32605

TITLE PD
 NAME Harrell, Victor ☒ Delete
 STREET ADDRESS 1717 NW 23rd Ave, 3C
 CITY-ST-ZIP Gainesville, FL 32605

TITLE D
 NAME Delano, Virginia ☐ Delete
 STREET ADDRESS 1719 NW 23rd Ave, 5C
 CITY-ST-ZIP Gainesville, FL 32605

TITLE D
 NAME Nelson, Judith ☒ Delete
 STREET ADDRESS 1719 NW 23rd Ave, 2F
 CITY-ST-ZIP Gainesville, FL 32605

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP
 NAME Moyar, Margaret ☐ Change ☒ Addition
 STREET ADDRESS 1717 NW 23rd Ave, 2D
 CITY-ST-ZIP Gainesville, FL 32605

TITLE DV
 NAME Fisher, Waldo ☐ Change ☒ Addition
 STREET ADDRESS 1717 NW 23rd Ave, 1C
 CITY-ST-ZIP Gainesville, FL 32605

TITLE DS
 NAME Pope, June ☐ Change ☒ Addition
 STREET ADDRESS 1719 NW 23rd Ave, PHD
 CITY-ST-ZIP Gainesville, FL 32605

TITLE DT
 NAME Vilallonga, Maria ☐ Change ☒ Addition
 STREET ADDRESS 1719 NW 23rd Ave, 3B
 CITY-ST-ZIP Gainesville, FL 32605

TITLE D
 NAME Pierson, K. Kendall ☐ Change ☒ Addition
 STREET ADDRESS 1717 NW 23rd Ave, PHC
 CITY-ST-ZIP Gainesville, FL 32605

TITLE D
 NAME Fye, Richard ☐ Change ☒ Addition
 STREET ADDRESS 1717 NW 23rd Ave, PHF
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Margaret B. Moyar

4/26/01

(352) 372-3558

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)