FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT #

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11 Corporatio	11110	• •			
THE G	AINESVILLE COMMUNITY	BAND, INC.			
Principal Place of Business Mailing Address				t sadist shann tites andt ditti ibani tari didit didit didit	. 07911 01811 97811 1001
2321 NW 41ST ST., STE A-2 QAINESVILLE FL 32606 2321 NW 41ST ST., STE A-2 GAINESVILLE FL 32606			A-2	3. Date Incorporated or Qualified 04/06/1977	
				4. FEI Number	Applied For
				<u>59-1744150</u>	Not Applicable
· ·	lace of Business	2a. Mailing Address		5. Certificate of Status Desired	3.75 Additional
21 26				Fee Required	
Sulte, Apt. #, etc. Suite, Apt. #, etc.				5.00 May Be	
27				dded to Fees	
23 28		_ 		7. Is this nonprofit corporation a homeowners association? Yes No	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current y	
24	25	29	30	Personal Property Tax due June 30,	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agen	1
			81 Name		
LEHNER, RICHARD A.			82 Street A	2 Street Address (P.O. Box Number is Not Acceptable)	
4134 NW 67TH TERRACE					
GAINESVILLE FL 32808			83		
			84 City	85	Zip Code
				FL	
11. Pursuant office or r	to the provisions of Sections 617.050 registered agent, or both, in the State	02 and 617.1508, Florida Statut e of Florida. Such change was	tes, the above-named c authorized by the corpo	corporation submits this statement for the purpose of chan pration's board of directors. I hereby accept the appointm	iging its registered ent as registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 617.0503, FI	orida Statutes.		
SIGNATURE .	Signature, typed or printed name of registered ap	ent and title if applicable (AUV)	FE: Registered Agent signature re	equired when reinstating) DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
TITLE	D	DELETE	1.1 TITLE		hange Addition
NAME	ALLEN, CHARLES 12N		1.2 NAME		
STREET ADDRESS	REET ADDRESS 9221 NW 11TH PL 13		1.3 STREET ADDRESS		
CITY - ST-ZIP	GAINESVILLE FL		1.4 CITY - ST - ZIP		
TITLE	P	☐ DELETE	2.1 TITLE		hange Addition
NAME	HOWARD, GREG		2.2 NAME		
STREET ADDRESS	2801 NW 32ND ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE, FL 00000		2. 4 CITY-ST-ZIP		
TITLE	D DELLARD	☐ DELETE	3.1 TITLE	□ 0	hange L Addition
NAME	LEHNER, RICHARD		3.2 NAME		
STREET ADDRESS	4134 NW 67 TERRACE		3.3 STREET ADDRESS		
CITY-ST-ZIP	S GAINESVILLE, FL 00000	DELETE	3.4. CITY-ST-ZIP		hange Addition
TITLE	S Clore, Chris		4.1 TITLE		hange L Addition
NAME	3146 NW 45TH AVENUE		4. 2 NAME		
STREET ADDRESS	GAINESVILLE, FL 00000		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		hange Addition
NAME	HENDERSON, CLAUDIA		5.2 NAME	<u> </u>	range
STREET ADDRESS	6417 SW 35TH WAY		5.3 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE, FL 00000		5.4 CITY - ST - ZIP		ļ
TITLE	1	DELETE	6.1 TITLE	□ c	hange
NAME	SPAIN, SUSAN		6.2 NAME		_
STREET ADDRESS	6011 NW 23RD AVE		6.3 STREET ADDRESS		
CITY-ST-7IP	GAINESVILLE FI		6.4 CITY - ST - 7JP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FILED

Feb 05 1998 8:00am

Secretary of State