2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 21, 2008 8:00 am Secretary of State

DOCUMENT # 738578 1. Entity Name THE GAINESVILLE COMMUNITY BAND, INC.						02-21	-2008 9002	24 039 ****61	.25
Principal Place of Business 2321 NW 41ST ST., STE A-2 GAINESVILLE, FL 32606 Mailing Address 2321 NW 41ST ST., STE A GAINESVILLE, FL 32606					1 13811 1		N 146 BY 1814 BY BY	IEM EIBU SIBH SISH SIZH	11 21 B 1 1821
Principal Place of Business - No P.O. Box # 3. Mailing			g Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			B Chg-NF	CR	2E037 (12/06)	
City & State		City & State			4. FE! Num 59_17	ber 44150		- <u>-</u>	plied For
Zip	_ Country	Zip Country		intry		te of Status E	esired	\$8.75 Add	
	6. Name and Address of Curren	nt Registered Agent			7. Name a	nd Address	of New Regist	<u> </u>	•
				Name					
BRILLY, CLAUDIA 6417 SW 35TH WAY GAINESVILLE, FL 32608				Street Address (P.O. Box Number is Not Acceptable)					
				City				FL Zip Code	3
	named entity submits this statement ions of registered agent.	for the purpose of changir	ng its registere	ed office or a	registered agent, or I	ooth, in the St	ate of Florida.	I am familiar with,	and accept
Į	Signature, typed or printed name of registered age	ent and title if applicable.	(NOTE: Registered	d Agent signatur	re required when reinstating)			DATE	
	Filing Fee is \$61.25	9. Election	n Campaign F	inancing	\$5.00 ма	/Be	Make	check payable to	
_	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Trust Fo	n Campaign F und Contributi	inancing	\$5.00 May	es :	Make (Florida C	check payable to epartment of St	ate
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND E PD SHAPIRO, JEFF 3736 NW 23RD PLACE GAINESVILLE, FL 32605	9. Election Trust Fo	n Campaign F und Contributi 11. Title NAM STRE CITY	E E E E E ST-ZIP E	\$5.00 May Added to Fe ADDITIONS/OF PAULA WILL 12331 NW GANNES/ILL BILL HELL 411 NE	CHANGES TO CERSON 912-LAN LE PL 15-LS	Make of Florida D. OFFICERS AI	check payable to bepartment of St ND DIRECTORS IN Change	10 Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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:

SUSAN SUSAN B. TO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #