

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758605

FILED  
Apr 18, 2009  
Secretary of State

Entity Name: GAINESVILLE CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

711 NW 23TH AVE  
SUITE 1  
GAINESVILLE, FL 32609 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 14042  
GAINESVILLE, FL 32604

**New Mailing Address:**

FEI Number: 59-2123620

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MUTCH, SAMUEL A ESQ.  
2114 NW 40TH TERR.  
STE. A1  
GAINESVILLE, FL 32605 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: D ( ) Delete  
Name: MURPHEY, MILLEDGE  
Address: 1815 NW 7 PLACE  
City-St-Zip: GAINESVILLE, FL 32603

Title: PD ( ) Delete  
Name: COOPER, ROBERT E SR  
Address: 1704 NW 38 DR  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: JONES, ED JR  
Address: 4533 NE 77TH AVE.  
City-St-Zip: GAINESVILLE, FL 32605

Title: D (X) Delete  
Name: BARITEAU, HENRY  
Address: 3605 SW 30 TERR #D  
City-St-Zip: GAINESVILLE, FL 32608

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MURPHEY, MILLEDGE  
Address: 1815 NW 7 PLACE  
City-St-Zip: GAINESVILLE, FL 32603

Title: D (X) Change ( ) Addition  
Name: MILLOTT, ROBERT  
Address: 1403 NE 20 AVE  
City-St-Zip: GAINESVILLE, FL 32609

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MILLEDGE MURPHEY

PRES

04/18/2009

Electronic Signature of Signing Officer or Director

Date