2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762981

FILED Apr 14, 2010 Secretary of State

Entity Name: THE TRIANGLE CLUB OF GAINESVILLE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

1005 S.E. 4TH AVENUE 1005 S.E. 4TH AVENUE

GAINESVILLE, FL 326013975 GAINESVILLE, FL 326013975 US

Current Mailing Address: New Mailing Address:

1005 S.E. 4TH AVENUE 1005 S.E. 4TH AVENUE

GAINESVILLE, FL 326013975 GAINESVILLE, FL 326013975 US

FEI Number: 59-2890418 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROBELL, SUSAN 5130 NW 48TH TERRACE GAINESVILLE, FL 32606 US

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:

 Name:
 ROBELL, SUSAN

 Address:
 5130 NW 48TH AVE

 City-St-Zip:
 GAINESVILLE, FL 32606

Title: \

Name: CROW, TOM

Address: 8401 NW 13TH STREET # 98 City-St-Zip: GAINESVILLE, FL 32653

Title: F

Name: COLVIN, PATI

Address: 1116 NE 12TH AVENUE City-St-Zip: GAINESVILLE, FL 32601

Title:

Name: THOMAS, RUTH

Address: 2309 SE 45TH TERRACE
City-St-Zip: GAINESVILLE, FL 326533264

Title:

 Name:
 BOSTWICK, KEN

 Address:
 3118 SE 29TH LANE

 City-St-Zip:
 GAINESVILLE, FL 32641

Title: D

Name: CROW, VICTORIA

Address: 8401 NW 13TH STREET # 98 City-St-Zip: GAINESVILLE, FL 32653

I hereby 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 all other like empowered.

SIGNATURE: SUSAN ROBELL T 04/14/2010