2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003282

FILED Jan 09, 2008 Secretary of State

Entity Name: ALACHUA COUNTY COALITION FOR THE HOMELESS AND HUNGRY, INC.

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

703 NE 1ST STREET GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

P.O. BOX 5494 P.O. BOX 5494

GAINESVILLE, FL 326275494 GAINESVILLE, FL 326275494 US

FEI Number: 43-1960048 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:

HARRISON, THERESA HARRISON, THERESA 912 NE 2ND ST. 2100 NW 53 AVE.

GAINESVILLE, FL 32601 US GAINESVILLE, FL 32653 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: 01/09/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

SELVESTER, RADHA HALL, RONALD Name: Name:

703 NE 1ST ST Address: 408 W. UNIVERSITY AVE, SUITE 501 Address: GAINESVILLE, FL 32601 GAINESVILLE, FL 32601

City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition

MONAHAN, GAIL Name: Name: Address: 703 NE 1ST ST Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip:

Title: () Delete Title: (X) Change () Addition ELLIOTT, MIRIAM W Name: STACEY, RANDY Name:

Address: 413 S MAIN ST. Address: 419 NE 1ST ST. City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601

Title: () Delete Title: (X) Change () Addition

Name: STACY, RANDY Name: MARCHESE, VIANNE 419 NE 1ST STREET 620 NW 16TH AVE. Address: Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32609

Title: () Delete Title: (X) Change () Addition SKELLY, JOHN CLARK, SAM

Name: Name: 218 SE 24TH ST. 1300 NW 6TH ST. Address: Address: City-St-Zip: GAINESVILLE, FL 32641 City-St-Zip: GAINESVILLE, FL 32601

Title: () Delete Title: (X) Change () Addition

LEIGHTON, GEORGENE VANN. KENT Name: Name: Address: 702 NE 1ST ST Address: 413 S. MAIN ST. GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601 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: GAIL MONAHAN Т 01/09/2008