2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 27, 2006 08:00 AN Secretary of State

DO NOT WRITE IN THIS SPACE 01192006 No Chg-NP CR2E037 (11/05)	1. Entity Nar THE ROO Principal Place 9818 S W 2	CK OF GAINESVILLE, INC. ce of Business A 4TH AVENUE	failing Address 9818 S W 24TH AVENUE GAINESVILLE, FL 32607 U		-	Secretary of State	
SIGNATURE Squature, topad or prived name of registered agent and lifted applicable. MOTE Registered Agent soundary recolored when refreshability) DATE Filling Fee is \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$5,000 May Be Added to Fees	BRANTLE	6. Name and Address of Current Registry, GEORGE A.	N THIS SPA		01192006 4. FEI Numb 59-281 5. Certificate	No Chg-NP CR2E037 (11/05) Der Applied For Not Applicable of Status Desired \$8.75 Additional Fee Required NOT WRITE	
TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME NAME STREET ADDRESS CITY-ST-ZIP NAME NAME STREET ADDRESS CITY-ST-ZIP NAME NAME NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDR	SIGNATURE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D NAME STREET ADDRESS CITY-ST-ZIP TITLE						* = -	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TO DO NOT WRITE IN THIS SPACE	TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS	PCD BRANTLEY, GEORGE A. 13510 NW 50 AVE GAINESVILLE, FL 32606 D BRANTLEY, SUZANNE M. 13510 NW 50 AVE	CTORS			U00000403751 02/06/06-80019-017 61.25	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D MILLER, TAD E. 9932 S.W. 22ND LANE				· · · · · · · · · · · · · · · · · · ·	
nne i	TITLE NAME STREET ADDRESS						
NAME STREET ADDRESS CITY-ST-ZIP 12. 1 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 each; that I am an officer or director.	NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with this t	iling does not qualify for the exe	emptions contained	in Chapter 119	9, Florida Statutes, I further certify that the information	