

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 9:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000003091 (6)

1. Corporation Name

GAINESVILLE DOWNTOWN OWNERS AND TENANTS, INC.

Principal Place of Business

Mailing Address

101 SE 2ND PLACE
SUITE 202
GAINESVILLE FL 32601

P O BOX 464
GAINESVILLE FL 32602-0464

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/01/1993	3a. Date of Last Report 04/07/1994
4. FBI Number 59-3191085	Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

21. Principal Place of Business	2a. Mailing Address
22. Suits, Apt. #, etc.	26. Suite, Apt. #, etc.
23. City & State	27. City & State
24. Zip	28. Zip
25. Country	29. Country
30. Country	

9. Name and Address of Current Registered Agent

**MCGURN, LINDA C
101 SE 2ND PLACE
SUITE 202
GAINESVILLE FL 32601**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MCGURN, LINDA C
STREET ADDRESS	4918 SE 185 AVE
CITY - ST - ZIP	MICANOPY FL 32667
TITLE	D
NAME	LITTLE, JOE
STREET ADDRESS	UF COLLEGE OF LAW
CITY - ST - ZIP	GAINESVILLE FL 32601
TITLE	D
NAME	WARREN, MARY B
STREET ADDRESS	1107 NE 4TH STREET
CITY - ST - ZIP	GAINESVILLE FL 32601
TITLE	D
NAME	MERKY, CYNTHIA
STREET ADDRESS	118 SE 1ST ST
CITY - ST - ZIP	GAINESVILLE FL 32601
TITLE	SD
NAME	HUTCHINSON, ROBERT
STREET ADDRESS	300 EAST UNIVERSITY AVE
CITY - ST - ZIP	GAINESVILLE FL
TITLE	P
NAME	ROSEN, PAULA
STREET ADDRESS	12 EAST UNIVERSITY AVE
CITY - ST - ZIP	GAINESVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MCINTYRE, MIKE	
2.3 STREET ADDRESS	13 W UNIVERSITY AVE	
2.4 CITY - ST - ZIP	GAINESVILLE FL 32601	
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	WARREN, MARY B	
3.3 STREET ADDRESS	1021 NE 5th TER	
3.4 CITY - ST - ZIP	GAINESVILLE FL 32601	
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	SMART WILLIAMS, SUSAN	
4.3 STREET ADDRESS	21 W UNIVERSITY AVE	
4.4 CITY - ST - ZIP	GAINESVILLE FL 32601	
5.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	STUMP SWANSON, CYNTHIA	
5.3 STREET ADDRESS	500 E UNIVERSITY AVENUE #C	
5.4 CITY - ST - ZIP	GAINESVILLE FL 32601	
6.1 TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sandra B. Morham Treasurer

4/10

904 3226172

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Telephone Number

NAB - 3091

Attachment to Corporation Annual Report
Gainesville Downtown Owners and Tenants, Inc.
Document #N93000003091 (6)

Officers and Directors - Continued

D
Pamela Biddlecomb
14 SW 1st Avenue
Gainesville, FL 32601

D
Paul Ferraro
605 NE First Street
Gainesville, FL 32601

D
Tom Levy
6 East University Avenue
Gainesville, FL 32601

D
Wade Tyler
113 N Main Street
Gainesville, FL 32601

(GDOT\Director.lst)