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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N93000003091 (6)

GAINESVILLE DOWNTOWN OWNERS AND TENANTS, INC.

Mailing Address Principal Place of Business 101 SE 2NO PLACE P O BOX 464 GAINESVILLE FL 32602-0464 SHITE 202 GAINESVILLE FL 32601 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995 07/01/1993 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3191085 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Ζφ Country Zip Yes X No 30 Florida Statutes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MCGURN, LINDA C Street Address (P.O. Box Number is Not Acceptable) 82 101 SE 2ND PLACE 83 SUITE 202 **GAINESVILLE FL 32601** 84 City Zip Code 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. Addition Change DELETE 11 TITLE TITLE MCGURN, LINDA C 1.2 NAME NAME 1.3 STREET ADDRESS 4918 SE 185 AVE STREET ADDRESS MICANOPY FL 1.4 CITY - ST-ZIP CITY-ST-ZIF Change ☐ Addition DELETE 2.1 TITLE TITLE MCINTYRE, MIKE 22 NAME NAME STREET ADDRESS 13 W UNIV AVE 2.3 STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL 2 4 CITY-ST-ZIP DELETE Change ☐ Addition 31 THILE TITLE 3.2 NAME NAME WARREN, MARY B 1021 NE 5TH TERR 3.3 STREET ADDRESS STREET ADDRESS GAINESVILLE FL 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE Change ☐ Addition TITLE 41 TITLE NAME SMART WILLIAMS, SUSAN 4. 2 NAME 21 W UNIV AVE 4.3 STREET ADDRESS STREET ADDRESS GAINESVILLE FL 4.4 City-St-ZiP CITY-ST-ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE Sn 5.2 NAME STUMP SWANSON, CYNTHIA NAME 500 E UNIV AVE #C 5.3 STREET ADDRESS STREET ADDRESS GAINESVILLE FL 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 61 TIFLE TITLE NAME ROSEN, PAULA 62 NAME 1412 NW 40 TERRACE 12 EAST UNIVERSITY AVE 6.3 STREET ADDRESS STREET ADDRESS ST-ZIP GAINESVILLE FL

1 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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. CITY-ST-ZIP

SIGNATURE:

14. I do hereby

3/26/96 2043226172 Baying Phone #

Pg lat 2

(12/95)CR2E037 193000003091

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<u>Gainesville Downtown Owners and Tenants, Inc. Officers and Directors</u>

Attachment to 1996 Annual Report

D Dawn Colson 104 N. Main Street Gainesville, FL 32601

D Larry Little 201 SE Depot Avenue Gainesville, FL 32601

D George Reynolds 21 W. University Avenue Gainesville, FL 32601

D/S Cyndi Robinson 114 SE 1st Street Gainesville, FL 32601

D/T LuAnne Watson 104 N. Main Street Gainesville, FL 32601