FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 750117

(4)

GENTLE WORLD, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

ROUTE 4, BOX 585 ALACHUA FL 32615 ROUTE 4. BOX 585 ALACHUA EL 32615-980

FILED Jan 31 1997 8:00am Secretary of State



ALACHUA FL 326	013	ALAUHUA FL 32013-8004								
					3. Date Incorporated or Qualified 12/10/1979	3e. Date o 02/2	f Last Re 3/1990	eport B		
	ace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For		
21 60 10	NW 158 St	26 PO BOX110			59-1999433			t Applicable		
Suite, Apt. :	#, elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$	8.75 A Fee Re	Additional quired		
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be		
23 Alac		28 Paia, Hc			Trust Fund Contribution		Added t	o Fees		
Zip 24 3261	S Country 25 Neachua	29 96779-0110 30	Country Ma		8. This corporation has liability for in Florida Statutes	tangible tax Yes 💢 N		199.032,		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	istered Age	nt			
			81	Name		*				
Robert, Vostrej jr					82 Street Address (P.O. Box Number is Not Acceptable)					
7 EAST SILVER SPRINGS BLVD				83						
OCALA, FLORIDA										
32670			84	City		FL 6	Zip (Code		
office or re	o the provisions of Sections 617.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was aut	horized by	the corp	corporation submits this statement for the purporation's board of directors. I hereby accept	roose of cha	inging its ment as	s registered registered		
SIGNATURE _	Signature, typed or printed name of registered ag	ent and title if anolicable. (NOTE: R	tapistered Ape	nt signature	required when reinstating)	DATE		·		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		ECTOR	S IN 12		
TITLE	SD	DELETE	1.1 TITLE		5D .		Change	Addition		
NAME	PATNOI, MELINDA	•	1.2 NAME		JOHN KIRSON					
STREET ADDRESS	ROUTE 4, BOX 585		1.3 STREET	ADDRESS	6010 NW 158 St					
CITY-ST-ZIP	ALACHUÁ, FL 32615		1.4 CiTY - S	T-ZIP	Alachua, FL 32615		/			
TITLE	PD	☐ DELETE	2.1 TITLE		PD		Change	Addition		
NAME	WALDBAUM, BURTON		2.2 NAME		BURTON WALDBRUM					
STREET ADDRESS	ROUTE 4, BOX 585		2.3 STREET	ADDRESS	6010 NW 158 ST					
CITY-ST-ZIP	ALACHUA, FL 32615		2. 4 CITY - 9	ST-2(P	Alachua, FL32615		<i>)</i>			
TITLE	DT	☐ DELETE	3.1 TITLE		TD .	Z	Change	Addition		
NAME	WEIL, KEVIN	1	3.2 NAME		KEVIN WEIL					
STREET ADDRESS	ROUTE 4 BOX 585		3.3 STREET	address	6010 NW 188 ST					
CITY-ST-ZIP	ALACHUA, FL 32615		3.4. CITY - S	T-ZIP	Adachua, FL 32615	· ·	<i></i>			
TITLE	VD	☐ DELETE	4.1 TITLE		V Ø		Change	Additio		
NAME	WALDBAUM, MERLE		4. 2 NAME		MERLE WALDBAUM	<u>م</u> ر				
STREET ADDRESS	ROUTE 4, BOX 585		4.3 STREET	address	6010 NW 158 ST					
CITY-ST-ZIP	ALACHUA, FL 32615		4.4 CITY - S	T-ZIP	Alachua, Fl 32615	· •				
TITLE		☐ DELETE	5.1 TITLE		•		Change	Additio		
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET	ADDRESS	•					
CITY-ST-ZIP			5.4 CITY - S	T-ZIP						
TITLE		☐ DELETE	6.1 TITLE				Change	Addition		
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET	ADDRESS						
CITY-ST-ZIP			6.4 CITY - S							
information I am an of	n indicated on this annual report or :	supplemental annual report is true r the receiver or trustee empowers	and accu ed to exec	ırate and	tated in Section 119.07(3)(i), Florida Statutes, that my signature shall have the same legal eport as required by Chapter 617, Florida Sta	effect as if m	tade und	der oath: th:		