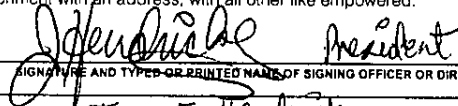


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 20, 2008 08:00 AM
Secretary of State

DOCUMENT # N27888 1. Entity Name 3309 PALMETTO, INC.							
Principal Place of Business 11415 PALMETTO ALACHUA, FL 32615 US		Mailing Address 531 TURKEY CRK ALACHUA, FL 32615 US	 02192008 No Chg-NP CR2E037 (4/06) <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 80%;">4. FEI Number 59-2904601</td><td style="width: 20%;">Applied For Not Applicable</td></tr><tr><td colspan="2">5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required</td></tr></table>	4. FEI Number 59-2904601	Applied For Not Applicable	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
4. FEI Number 59-2904601	Applied For Not Applicable						
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required							
DO NOT WRITE IN THIS SPACE							
6. Name and Address of Current Registered Agent HENDRICKS, JANE E 11415 PALMETTO BLVD ALACHUA, FL 32615		DO NOT WRITE IN THIS SPACE					
8. 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. I am familiar with, and accept the obligations of registered agent							
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
2008 Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS		U000000833141 02/28/08-80001-004 61.25 DO NOT WRITE IN THIS SPACE					
TITLE	S						
NAME	LONGMORE, KRISTEN						
STREET ADDRESS	11417 PALMETTO BLVD						
CITY-ST-ZIP	ALACHUA, FL 32615						
TITLE	VP						
NAME	BRYANT, BARBARA						
STREET ADDRESS	11419 PALMETTO BLVD						
CITY-ST-ZIP	ALACHUA, FL 32615						
TITLE	D						
NAME	GREEN, MARTHA J						
STREET ADDRESS	5631 SW 35 WAY						
CITY-ST-ZIP	GAINESVILLE, FL 32608						
TITLE	PT						
NAME	HENDRICKS, JANE E						
STREET ADDRESS	11415 PALMETTO BLVD						
CITY-ST-ZIP	ALACHUA, FL 32615						
TITLE							
NAME							
STREET ADDRESS							
CITY-ST-ZIP							
TITLE							
NAME							
STREET ADDRESS							
CITY-ST-ZIP							
12. I 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE:  President		2-19-08 386-418-1111					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Jane E. Hendricks		Date Daytime Phone #					