#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008375

Entity Name: GAINESVILLE COUNCIL ON AGING, INC.

**FILED** Jan 22, 2016 **Secretary of State** CC8837676357

# **Current Principal Place of Business:**

1311 SW 16TH ST. GAINESVILLE, FL 32608

## **Current Mailing Address:**

1311 SW 16TH ST.

GAINESVILLE, FL 32608

FEI Number: 65-1075845 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

SHIMBERG, ROBERT ESQ HILL, WARD, HERDERSON 101 E KENNEDY BLVD #3700 TAMPA, FL 33602 US

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.

SIGNATURE: ROBERT SHIMBERG 01/22/2016

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

**EXECUTIVE DIRECTOR** Title Title **DIRECTOR** Name HURT. EDWARD W Name O'CARROLL, PAT Address 1311 SW 16TH ST. Address 3905 NW 37TH PLACE GAINESVILLE FL 32606 City-State-Zip: City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR Title DIRECTOR

SALMANI, TAHIR DR Name Name WATHEN, STEVE

Address PO BOX 359122 Address 445 HUTCHINSON AVE

GAINESVILLE FL 32635-9122 City-State-Zip: City-State-Zip: COLUMBUS OH 43235

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD HURT

SUITE 800

**EXECUTIVE DIRECTOR** 

01/22/2016