

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02065

Entity Name: UNITY OF GAINESVILLE, INC.**Current Principal Place of Business:**8801 NW 39TH AVE
GAINESVILLE, FL 32606**Current Mailing Address:**8801 NW 39TH AVE
GAINESVILLE, FL 32606 US**FEI Number:** 59-2499226**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BENTLEY, ELEANOR MINISTER
8801 NW 39 AVENUE
GAINESVILLE, FL 32606 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:** ELEANOR BENTLEY

03/04/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name TATUM, JACQUE
Address 8801 NW 39TH AVE
City-State-Zip: GAINESVILLE FL 32606

Title PRESIDENT
Name MILLS, LAURIE
Address 8801 NW 39TH AVE
City-State-Zip: GAINESVILLE FL 32606

Title TRUSTEE
Name SHEPARD, PHYLLIS
Address 8801 NW 39TH AVE
City-State-Zip: GAINESVILLE FL 32606

Title TRUSTEE
Name COLEMAN, GABRIEL
Address 8801 NW 39TH AVENUE
City-State-Zip: GAINESVILLE FL 32606

Title CHURCH ADMINISTRATOR
Name BARBARA, GORDON J
Address 8801 NW 39TH AVENUE
City-State-Zip: GAINESVILLE FL 32606

Title SECRETARY
Name BONNELL, DONNA
Address 8801 NW 39TH AVENUE
City-State-Zip: GAINESVILLE FL 32606

Title VP
Name ROBINSON, WENDY
Address 8801 NW 39TH AVENUE
City-State-Zip: GAINESVILLE FL 32606

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: BARBARA GORDONCHURCH
ADMINISTRATOR

03/04/2020

Electronic Signature of Signing Officer/Director Detail

Date