

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000000688

Entity Name: PAMANA OF GAINESVILLE, INC.**Current Principal Place of Business:**8522 NW 35TH RD.
GAINESVILLE, FL 32606**Current Mailing Address:**PO BOX 358212
GAINESVILLE, FL 32635 US**FEI Number:** 84-4049542**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**IZON, ANGELITO
8522 NW 35TH RD.
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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MADAMBA, JOHNJOHN
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title VICE PRESIDENT
Name CAPUNGAN, DANTE
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title SECRETARY
Name ROXBOROUGH, DIANNE
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title TREASURER
Name GAYO, JOJO
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title FINANCE & BANK OFFICER
Name PANGANIBAN, EWIN
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title MEMBERSHIP ROSTER/CULTURAL &
 YOUTH CHAIR
Name ANONUEVO, JENNIFER
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title SPORTS COMMITTEE
Name AUSTRIA, DARREN
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title CHAIRMAN BOT
Name GAMAD, NICK
Address PO BOX 35812
City-State-Zip: GAINESVILLE FL 32635

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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: ANGELITO IZON**BOARD OF TRUSTEE****04/29/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VICE CHAIRMAN BOT
Name ANGELES, MELODY
Address PO BOX 35812
City-State-Zip: GAINESVILLE FL 32635

Title BOARD OF TRUSTEE
Name FLORES, COSETTE
Address PO BOX 35812
City-State-Zip: GAINESVILLE FL 32635

Title BOARD OF TRUSTEE
Name MCGLYNN, DADA
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title EMERITUS CHAIRMAN
Name IZON, ANGELITO
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title BOARD OF TRUSTEE
Name CAMPOMANES, BENJAMIN
Address PO BOX 35812
City-State-Zip: GAINESVILLE FL 32635

Title BOARD OF TRUSTEE
Name FLORIDA, BUTCH
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635

Title BOARD OF TRUSTEE
Name VALENCIA, JEROME
Address PO BOX 358212
City-State-Zip: GAINESVILLE FL 32635