

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22652

Entity Name: ROTARY CLUB OF GAINESVILLE FOUNDATION, INC.**Current Principal Place of Business:**11908 NE STATE RD 26
GAINESVILLE, FL 32641**Current Mailing Address:**9330 NW 13 PL
GAINESVILLE, FL 32606**FEI Number:** 59-2914025**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EUBANK, F WESLEY
9330 NW 13 PL
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 VP, DIRECTOR
Name BOYD, WILLIAM D
Address 9330 NW 13 PL
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name DICKINSON, MARTIN
Address 9330 NW 13 PL
City-State-Zip: GAINESVILLE FL 32606

Title CHAIRMAN, DIRECTOR
Name HORVATH, GRACE L
Address 9330 NW 13 PL
City-State-Zip: GAINESVILLE FL 32606

Title CHAIRMAN, DIRECTOR
Name SPAIN, SUSAN
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title TREASURER, DIRECTOR
Name EUBANK, F WESLEY
Address 9330 N W 13TH PL
City-State-Zip: GAINESVILLE FL 32606-5592

Title SECRETARY, DIRECTOR
Name SMITH, KIRK
Address 9330 NW 13 PL
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name GRACY, M DAVID
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title DIRECTOR
Name LAWRENCE, PARKER
Address 9330 NW 13 PL
City-State-Zip: GAINESVILLE FL 32606

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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: F WESLEY EUBANK**TREASURER, DIRECTOR** 01/08/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CREVASSE, JOSEPH
Address 9330 NW 13 PL
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name CHRISTIAN, LARRY
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title DIRECTOR
Name FLEMING, GREG
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title DIRECTOR
Name KING, CHAD
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title DIRECTOR
Name NORTHCUTT, WILLIAM
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title PRESIDENT, DIRECTOR
Name SHANK, JASON
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title DIRECTOR
Name BOOK, ED
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title DIRECTOR
Name DOMENECH, TONY
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title DIRECTOR
Name HERMANN, JIM
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title DIRECTOR
Name MAZZEO, GEORGE
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641

Title DIRECTOR
Name OELRICH, IVAN
Address 11908 NE STATE RD 26
City-State-Zip: GAINESVILLE FL 32641