

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G60836

**Entity Name:** GAINESVILLE ARTISANS GUILD, INC.

**Current Principal Place of Business:**

201 SE SECOND AVENUE  
SUITE 113  
GAINESVILLE, FL 32601

**Current Mailing Address:**

201 SE SECOND AVENUE  
SUITE 113  
GAINESVILLE, FL 32601 US

**FEI Number:** 59-1304523

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TOVKACH, WALTER M  
5011 NW 8TH AVE  
GAINESVILLE, FL 32605 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	PD
Name	GRAY, MARILYN
Address	201 SE SECOND AVENUE SUITE 113
City-State-Zip:	GAINESVILLE FL 32601
Title	SD
Name	LOTTINVILLE, JOYCE MARIE
Address	4234 NW 21ST DR
City-State-Zip:	EVINSTON FL

Title	VD
Name	BUNTING, JEANNE
Address	1620 NW 16TH TERRACE
City-State-Zip:	GAINESVILLE FL 32605
Title	TD
Name	COLLETT, JACQUELYNE
Address	3619 NW 30TH BLVD.
City-State-Zip:	GAINESVILLE FL 32605

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JACQUELYNE COLLETT

**TREASURER**

01/14/2018

Electronic Signature of Signing Officer/Director Detail

Date