


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **721444** (8)

1. Corporation Name

THE PRESBYTERIAN AND DISCIPLES OF CHRIST STUDENT CENTER, INC.



Principal Place of Business 1402 W. UNIVERSITY AVE. GAINESVILLE FL 32603	Mailing Address 1402 W. UNIVERSITY AVE. GAINESVILLE FL 32603-1932
--	---

3. Date Incorporated or Qualified 07/30/1971	3a. Date of Last Report 05/01/1996
--	--

2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 59-6139133	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip 24	Country 25	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**DICKSON, GLENN
3644 NW 12TH ST.
GAINESVILLE FL 32605**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	MD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITE, ALISUN	1.2 NAME	
STREET ADDRESS	2701 NW 23RD BL. N120	1.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32605	1.4 CITY-ST-ZIP	
TITLE	VMD	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RAGSDALE, JOHN	2.2 NAME	RYAN PAOLANTONIO
STREET ADDRESS	1001 NW 98TH ST.	2.3 STREET ADDRESS	1402 W. Univ. Ave
CITY-ST-ZIP	GAINESVILLE FL 32606	2.4 CITY-ST-ZIP	Gainesville, FL 32603
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NINER, KELSEY	3.2 NAME	Elizabeth Nelms (SD)
STREET ADDRESS	19-0314 EAST HUME HALL UNIV OF FLORIDA	3.3 STREET ADDRESS	7020 NW 52nd DRIVE
CITY-ST-ZIP	GAINESVILLE FL	3.4 CITY-ST-ZIP	Gainesville, FL 32606
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DICKSON, GLENN	4.2 NAME	
STREET ADDRESS	3644 NW 12TH AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/97 352-376-2539

Date Daytime Phone #0010748

CR2E037 (9/96)