2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2006
Secretary of State

DOCUMENT# 725821

Entity Name: GAINESVILLE CHAPTER OF THE SOCIETY OF THE PRESERVATION AND ENCOURAGEMENT OF BARBERSHOPQUARTET SINGING IN AMERICA INC

Current Principal Place of Business:

806 NW 22ND STREET
GAINESVILLE, FL 32603 US

New Principal Place of Business:

Current Mailing Address:

806 NW 22ND STREET
GAINESVILLE, FL 32603 US

New Mailing Address:

FEI Number: 59-1441717 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DUNN, THEODORE O
806 NW 22ND STREET
GAINESVILLE, FL 32603 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: COHEN, DAVID S
Address: 5819 NW 69TH LANE
City-St-Zip: GAINESVILLE, FL 32653

Title: VP ( ) Delete
Name: ANTHONY, DARRELL
Address: 3736 NW 6TH PL
City-St-Zip: GAINESVILLE, FL 32607

Title: S ( ) Delete
Name: PETERSEN, ERIC
Address: 2829 NW 15TH PL
City-St-Zip: GAINESVILLE, FL 32605

Title: T ( ) Delete
Name: HUGHES, WALTER
Address: 8025 NW 27TH BLVD
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: T.O.DUNN AGEN 01/08/2006

Electronic Signature of Signing Officer or Director — Date