

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738578

FILED
Jan 16, 2009
Secretary of State

Entity Name: THE GAINESVILLE COMMUNITY BAND, INC.

Current Principal Place of Business:

2321 NW 41ST ST., STE A-2
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

2321 NW 41ST ST., STE A-2
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 59-1744150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRILLY, CLAUDIA
6417 SW 35TH WAY
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

BRILL, CLAUDIA
6417 SW 35TH WAY
GAINESVILLE, FL 32608 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: CLAUDIA BRILL

01/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILKERSON, PAULA
Address: 12337 NW 9TH LANE
City-St-Zip: GAINESVILLE, FL 32669

Title: D () Delete
Name: HELMS, BILL
Address: 611 NE 542 ST
City-St-Zip: OLD TOWN, FL 32680

Title: VPD3 () Delete
Name: DISHMAN, WILLIAM
Address: 3622 NW 53RD TERR
City-St-Zip: GAINESVILLE, FL 32606

Title: T () Delete
Name: SPAIN, SUSAN,
Address: 6011 NW 23RD AVE
City-St-Zip: GAINESVILLE, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: PIRZER, BILL
Address: 2716 SW 30TH TERR., #43C
City-St-Zip: GAINESVILLE, FL 32608

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

Title: PD (X) Change () Addition
Name: DISHMAN, WILLIAM
Address: 3622 NW 53RD TERR
City-St-Zip: GAINESVILLE, FL 32606

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

Title: S () Change (X) Addition
Name: BRILL, CLAUDIA
Address: 6417 SW 35TH WAY
City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN B. SPAIN

S

01/16/2009

Electronic Signature of Signing Officer or Director

Date