

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738712

FILED
Jan 02, 2008
Secretary of State

Entity Name: GAINESVILLE COMMUNITY MINISTRY, INC.

Current Principal Place of Business:

238 SW 4TH AVE
GAINESVILLE, FL 32601 US

New Principal Place of Business:

Current Mailing Address:

238 SW 4TH AVE
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 59-1724202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, MICHAEL L
238 SW 4TH AVE
GAINESVILLE, FL 32601 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: SD () Delete
Name: URGUHART, AUDREY D
Address: 8602 SW 1ST PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: T () Delete
Name: LANE, WARREN
Address: 526 NW 91ST ST.
City-St-Zip: GAINESVILLE, FL 32605

Title: VP () Delete
Name: FORRESTER, DON
Address: 307 NW 91ST STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: P () Delete
Name: ODOM, CORNELIA
Address: 4949 NW 79TH RD.
City-St-Zip: GAINESVILLE, FL 32635

Title: D () Delete
Name: WRIGHT, MICHAEL L
Address: 4023 NW 34TH PL
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:

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

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: MICHAEL L. WRIGHT

ED

01/02/2008

Electronic Signature of Signing Officer or Director

Date