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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

<u>, 1996</u>

DOCUMENT # 739327

(5)

BIG BROTHERS/BIG SISTERS OF GREATER GAINESVILLE, INC. Principal Place of Business Mailing Address															
1212 NW 12T SUITE C3	'H AVE.			O. BOX 14532 AINESVILLE FL 32604	ļ			٠							
GAINESVILLE US	FL 32601									orporated or Qu 13/1977	ualified		te of La 02/07		
2. Principal Pla	ace of Business	₩ 1± 1, 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2a.	Mailing Address					4. FEI Num					+	lied For
			26						29	1643115			60 -		Applicable
Suite, Apt. i	#, etc.		27	Suite, Apt. #, etc.					5. Certificat	e of Status Des	sired			r Do Ad e Pleqi	dditional Juired
City & State)			City & State					6. Election	Campaign Fina	ncing		\$5.	00 M	May Be
<u>]</u>			28							nd Contribution				ot beb	
Zip	Country		Zip		Cour	ntry			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No				9.032,		
4	25	d Address of Curre	29 Peciet	ared Agent	30				Florida S	tatutes nd Address o					
	9. Maille air	d Address of Carre	iit riegiati	orou Agent		81	Name		10			•			
KMELLIN	IGER, RICHAI	มา ม			}	82	Ctroot	Address	o (P.O. Boy N	umber is Not A	Acceptable	<u>e)</u>			
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	VILLE FL	- ·				83									
					}	84	City					FL	85	Zip Cc	ode
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11. Pursuant t or register familiar wit	and agont or bo	of Sections 617.050 th, in the State of Flo ne obligations of, Sec	rida Such	change was authoriz	ed by the c	ve-na corpa	amed co oration's	orporati board	ion submits th of directors. I	is statement fo hereby accept	r the purp the appo	oose of ch	anging it	s regis ed age	stered officent. I am
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64 CITY-ST-ZIP Gainsville, FL32607

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed or on an attachment with an address.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pearce

4-21.96

352 -375-2525

Daytime Phone #