2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#740123

FILED Jul 08, 2009 Secretary of State

Entity Name: GAINESVILLE, FLORIDA, HOUSING CORPORATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1900 SOUTHEAST 4TH STREET 1900 SE 4 STREET P.O. BOX 1468 GAINESVILLE, FL 32641

GAINESVILLE, FL 32601

Current Mailing Address:

New Mailing Address:

1900 SOUTHEAST 4TH STREET 1900 SE 4 STREET P.O. BOX 1468 GAINESVILLE, FL 32641

GAINESVILLE, FL 32601

FEI Number: 59-3528149 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SAIER, FRANK PATTY 4041 NW 37 PLACE

SUITE B

GAINESVILLE, FL 32606 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: FRANK P. SAIER 07/08/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: D () Change (X) Addition
Name: WILLIAMS, ROSA Name: LLOYD, DERRY

 Name:
 WILLIAMS, ROSA
 Name:
 LLOYD, DERRY

 Address:
 1900 SE 4TH ST.
 Address:
 1900 SE 4 STREET

 City-St-Zip:
 GAINESVILLE, FL 32641
 City-St-Zip:
 GAINESVILLE, FL 32641

Title: VP () Delete Title: VP (X) Change () Addition Name: WILLIAMS, ROSA Name: GODLEY, KAREN

 Address:
 1900 SE 4TH ST
 Address:
 8608 SW 77 AVENUE

 City-St-Zip:
 GAINESVILLE, FL 32641
 City-St-Zip:
 GAINESVILLE, FL 32608

Title: D () Delete Title: () Change () Addition

 Name:
 JONES, TONY
 Name:

 Address:
 1900 SE 4 STREET
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32641
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 GODLEY, KAREN
 Name:
 ELLIS, LARRY

 Address:
 8608 SW 77 AVENUE
 Address:
 1900 SE 4 STREET

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32641

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: ROSA WILLIAMS PD 07/08/2009