FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

752671

(8)

GAINESVILLE SUZUKI PLAYERS, INC.

	ł	ILEL)
Mar	12	1997	8:00am
Se	cret	tary o	f State



Principal Place of Business Mailing Address					(04) 1000 37 1000 37 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000			
P.O. BOX 23921. C/O SONNHILD		3415 NW 10TH AVE. GAINESVILLE FL 32805-4	1916					
GAINESVILLE FL US						3. Date Incorporated or Qualified	ort	
2. Principal Place of Business 2a. Mailing Addr 21 26		2a. Mailing Address	26			4. FEI Number Appli	ed For	
							pplicable	
Suite, Apt. #, etc.		······	Suite, Apt. #, etc.			5. Certificate of Status Desired See Requ		
City & State	^	City & State	 					
23		28				6. Election Campaign Financing \$5.00 M Trust Fund Contribution Added to 1		
Ziρ	Country	Zip	Col	untry	•	8. This corporation has liability for intangible tax under s. 19		
24	25	29	30			Florida Statutes Yes No		
	9. Name and Address of Curro	ent Registered Agent		I		10. Name and Address of New Registered Agent		
				81	Name			
-	ONNHILD F.			62	Street	t Address (P.O. Box Number is Not Acceptable)		
	V. 10TH AVE.			83				
GAINESV	1LLE FL 32605							
				84	City	F-	de	
11 Pursuant	to the provisions of Sections 617 Of	502 and 617 1508. Florida Ste	tutes the a	bove	-named	d corporation submits this statement for the purpose of changing its r	enistered	
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change wa	as authorize	d by	the corr	rporation's board of directors. I hereby accept the appointment as re-	gistered	
Ü	ть тапінат міті, апо ассерстве обі	igations of, Section 617.0505,	, rionoa sta	เบเซธ	•			
SIGNATURE .	Signature, typed or printed name of registered a	agent and title if applicable. (I	NOTE: Flegistere	ed Ager	nt signature	re required when reinstating) DATE		
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	N 12	
TITLE	DD	☐ DELETE	1.1 T	ITLE		Change	Addition	
NAME	Krits, sonnhild		1.2 N	IAME				
STREET ADDRESS	3415 NW 10 AVE.		1.3 9	TREET	address			
CITY - ST - ZIP	GAINESVILLE, FL 00000		1.4 0	ity-st	r-zip			
THILE	P/D	DELETE	2.1 1	ITLE		P/D . Change	Addition	
NAME	SNYDER, JANE		221	IAME		DERRICO/ DAVID		
STREET ADDRESS	1207 S.W. 112TH ST.		2.3 9	TREET	ADDRESS	3716 NW7 AVE		
CITY+SE-ZIP	GAINESVILLE FL 32607			CITY - S	T - ZIP	DERRICO/DAVID 3716 NW7 AVE QUL/FL 32605	1 4 4 100	
TITLE	V	☐ DELETE	3.11			Change	Addition	
NAME	DERRICO, DAVID		3.21	IAME				
STREET ADORESS	3716 NW 7TH AVE				address			
CITY-ST-ZIP	GAINESVILLE, FL 00000	DELETE		CITY-S	T-ZIP	Change	Addition	
TITLE		T DEFEIR	4.13			L] Change	Addition	
NAME	FLURIACH, AIMEE			NAME				
STREET ADDRESS	13131 NW 19TH PL				ADDRESS	5		
CITY-ST-ZIP	GAINESVILLE FL	DELETE		HTLE	T - ZiP	Change	Addition	
TITLE	SD NADIENE	F" DETEIG				L Criange	AGGIGION	
NAME	LOWERY, MARLENE 3111 NW 58TH BLVD.			NAME	AUDDECE	.]		
STREET ADDRESS	GAINESVILLE FL 32606				ADDRESS	7		
CITY-ST-ZIP		☐ DELETE		CITY - ST TITLE	1 - ZIP	Change	Addition	
TITLE	MD CHEDAGE CHEM	□ pereie		NAME		Lind Unange	ROUNDII	
NAME STREET ADDRESS	SMERAGE, GLEN 2104 NW 12 AVE.				*UUDtee			
STREET ADDRESS	GAINESVILLE, FL 00000				ADDRESS	`		
CHTY-ST-ZIP	GAINESVILLE, PL UUUUU		6.40	CITY S	1-ZIP			

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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

SOURCE DO TOPO OF PROPER OF SOURCE OF DESCRIPTION

Daytime Phone #AA1AA11

CR2E037 (9/96