

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 08, 2010**  
**Secretary of State**

DOCUMENT# 763896

**Entity Name:** GAINESVILLE VOA ELDERLY HOUSING, INC.**Current Principal Place of Business:**1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US**New Principal Place of Business:****Current Mailing Address:**1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US**New Mailing Address:****FEI Number:** 59-2473875**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: PD  
Name: KING, MICHAEL  
Address: 1660 DUKE ST.  
City-St-Zip: ALEXANDRIA, VA 22314

Title: CD  
Name: MOORE, CAROL  
Address: 1660 DUKE ST.  
City-St-Zip: ALEXANDRIA, VA 22314 US

Title: SD  
Name: FELDMAN, NANCY J  
Address: 1660 DUKE ST.  
City-St-Zip: ALEXANDRIA, VA 22314 US

Title: TD  
Name: LUBARSKY, JOSEPH M  
Address: 1660 DUKE ST.  
City-St-Zip: ALEXANDRIA, VA 22314 US

Title: ASAT  
Name: BOWMAN, DAVID T  
Address: 1660 DUKE ST.  
City-St-Zip: ALEXANDRIA, VA 22314 US

Title: AS  
Name: SHERIDAN, PATRICK  
Address: 1660 DUKE ST.  
City-St-Zip: ALEXANDRIA, VA 22314 US

I hereby 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 all other like empowered.

SIGNATURE: DAVID T. BOWMAN

ASAT

11/08/2010

Electronic Signature of Signing Officer or Director

Date

**DIRECTORS AND OFFICERS**

<u>Name:</u>	<u>Title</u>
Michael King	President & Director
Carol Moore	Chair & Director
Nancy J. Feldman	Secretary & Director
Joseph M. Lubarsky	Treasurer & Director
Ann B. Schnare	Director
John Morland	Director
Matt Nelson	Director
Russell Holman	Director
Shawn Bloom	Director
Wilfred Cooper	Director
Michael Spilane	Director
Carlos Maese	Director
David T. Bowman	Assistant Secretary/Assistant Treasurer
Thomas Turnbull	Assistant Secretary/Assistant Treasurer
Ronald Patterson	Assistant Secretary/Assistant Treasurer
Patrick Sheridan	Assistant Secretary
Robin Keller	Assistant Secretary

**Address for all Directors and Officers**

1660 Duke Street  
Alexandria, VA 22314