

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2008 8:00 am
Secretary of State

03-04-2008 90014 038 ****61.25

DOCUMENT # 771055					
1. Entity Name: THE GAINESVILLE FLORIDA CHAPTER OF THE MILITARY OFFICERS ASSOCIATION OF AMERICA, INC.					
Principal Place of Business: THE GAINESVILLE FL CHAPTER MOAA PO BOX 5034 GAINESVILLE, FL 32627 US			Mailing Address: THE GAINESVILLE FL CHAPTER MOAA PO BOX 5034 GAINESVILLE, FL 32627 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03022008 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-2413342	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WARD, PETER H RA 4001 NEWBERRY ROAD, SUITE C-1 SUITE M GAINESVILLE, FL 32607			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KIRKLAND, C.N. MAJ "KIRK" 1728 NE 94TH STREET GAINESVILLE, FL 32606	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIRKLAND, C.N. MAJ "KIRK" 1728 NW 94TH STREET GAINESVILLE FL 32606	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, JARED P CAPT. 10608 NW 53RD TER GAINESVILLE, FL 32653	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LITTMAN, MAYER COL 8904 NW 4 PL GAINESVILLE, FL 32607	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, MICHAEL J CAPT 2831 NW 41ST ST, STE G GAINESVILLE, FL 32606	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Y CANDACE GLEASON CIV 2126 SW 106TH DRIVE GAINESVILLE FL 32607	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, WILLIAM T CDR 5821 NW 91 BLVD GAINESVILLE, FL 32653	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ALBERT MILLER LTJG 5000 SW 25TH BLVD # 2109 GAINESVILLE FL 32608	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST KIRKPATRICK, GERALD J CAPT. 5200 SW 25TH BLVD., UNIT 2209 GAINESVILLE, US 32608	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KIRKPATRICK, GERALD J. CAPT 5200 SW 25TH BLVD, UNIT 2209 GAINESVILLE FL 32608	☒ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Gerald J. Kirkpatrick</i> GERALD J. KIRKPATRICK 3/3/2008 352-375-9985					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					