2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 21, 2007 8:00 am Secretary of State

1 Entity Nam	MENT # C10364 FILLE CHAPTER NO. 2 ROY	<u> </u>	21-2007 90021 021 *				
Principal Place of Business 130 NE 910TH AVENUE BRANFORD, FL 32008-8913 US Mailing Address P.O. BOX 972 GAINESVILLE, FL 32602 US					s kilis aliki erai eleli eleli eleli eleli	i Albil Byllia: Bi (SB)	
Principal Place of Business - No P.O. Box # 3. Mailing Address.			<u></u>				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	iuite, Apt. #, etc.		02082007 Chg-NP CR2E037 (12/06)		
City & State 0		City a state 0	City & State 1		4. FEI Number 59-6144502		
Zip	Country	Zip	Country	5. Certricate of Status Desired Fe		75 Additional Required	
6. Name and Address of Current Registered Agent Name				7. Name and Address	7. Name and Address of New Registered Agent		
SCHREIBER WILLIAM H				ss (P.O. Box Number is Not Acceptable)			
130 NE 910TH AVENUE BRANFORD, FL 32008-8913				eet Address (P.O. Box Number is NavAcceptable)			
				No cr			
			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 Signature, lyood or provided name of registered agent and table if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
				\$5.00 May Be Added to Fees	Make check pay Florida Departmen		
10.	OFFICERS AND DIRI		11.	ADDITIONS/CHANGES	TO OFFICERS AND DIRECT		
, TITLE NAME	D WARD, HARVEY L	☐ Delete	THILE T	ALARO, HARVE	Y h	Change	
STREET ADDRESS	S 2121 NE 55TH BLVD STREET A			WARD, HARVEY L. 2121 NE 55TH BIVD. GAINESVILLE, FL 32641			
CITY-ST-ZIP	GAINESVILLE, FL 32641		CITY-ST-ZIP	AINESVILLE	FL 32641		
NAME	DT OSGOOD, HOWARD B	Delete	TITLE D	HASKINS, P	ENNIS E.	Change Addition	
STREET ADDRESS	103 NW 40TH DR.		STREET ADORESS	6705 NW 5	52 NO TERRACE	F	
CITY-ST-ZiP	GAINESVILLE, FL 32607		· • · · · · · · · · · · · · · · · · · ·	GAINESVILLE	, FL 3265		
TITLE NAME	D JACKSON, WILLIAM S	☐ Delete	TITLE NAME		Ш	Change	
STREET ADDRESS	2020 NE 55TH BLVD		STREET ADDRESS			ľ	
CITY-ST-ZIP	GAINESVILLE, FL 326412749		CJTY-ST-ZIP			D	
NAME	SD SCHREIBER, WILLIAM H	☐ Delete	TITLE NAME		L	Change Addition	
STREET ADDRESS	130 NE 910TH AVENUE		STREET ADDRESS			ì	
CITY-ST-ZIP	BRANFORD, FL 320088913	Delete	CITY-ST-ZIP	Allians	O ANIE . D	Change Addition	
NAME	WILLIAMS, DANIEL F	Derete	NAME	50 N. LAKE	Avenue	Change In Addition	
STREET ADDRESS CITY-ST-ZIP	245 NE 8TH AVENUE LAKE BUTLER, FL 32054		STREET ADDRESS CITY-ST-ZIP	ake BUTLER	AVENTE AVENTE FL 32059	/	
TITLE	Dive Dotter, 12 ozoo	☐ Delete	TITLE	· · · · · · · · · · · · · · · · · · ·		Change Addition	
NAME			NAME		_		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
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 Sillia To Liviber WILLIAM H. SCHREIBER, SE RETARY 02-17-2007 1 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Dato Despire Prone 8							

Marlad 2-20-2007, CK# 1251