## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **FILED** Jan 31, 2006 08:00 AM Secretary of State

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1. Entity Name GAINESVILLE FAMILY INSTITUTE, INC.



Principal Place of Business

Mailing Address

1031 N.W. 6TH STREET

1031 N.W. 6TH STREET BLDG C

BLDG C

GAINESVILLE, FL 32601 US

GAINESVILLE, FL 32601



01272008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2336932

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

MAZADIO ANDDES I

2110 S.W.	88 STREET ILLE, FL 32607						
the obligat	named entity submits this statement for the plons of registered agent.	eurpose of changing its register	ed office or a			of Florida, (am lamillar wi	th, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and fille	I applicable [NOTE: Registere	d Agent signatur	e required when reinstalling)		DATE	<del></del>
	E NOWIII FEE IS \$150,00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finar Trust Fund Confribution.	ncing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECT	TORS	1	** .			
TITLE NAME STREET ADORESS CITY-ST-ZIP	D STEIER, HERBERT 1929 NW 14 AVE GAINESVILLE, FL 32605 STD	-		and supplied the second of the	T-/0	0000410480 0006-80038 <u>-</u> 004	1 150,00
title Name Street Address City-St-Zip	NAZARIO, ANDRES, JR. 2110 SW 88TH ST GAINESVILLE, FL 32607			Andrew State (1995) (19		The second secon	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DC	NOT	WRITE	
TITLE NAME STREET ADDRESS COTY-ST-ZIP				N.	THIS	SPACE	
TITLE Name Street address City-St-Zip			• • • • • • • • • • • • • • • • • • • •		The second secon	and makes the second se	
TITLE NAME STREET ADDRESS CHY-ST-ZIP				· · · · · · · · · · · · · · · · · · · ·	ار دروشاده داده داداد دارشاده داده داداد	general	

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I turther 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with any address, with all other like empowered.

SIGNATURE: