

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H18595

Entity Name: GATOR PLUS, INC.

FILED  
Mar 24, 2010  
Secretary of State

**Current Principal Place of Business:**

1620 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32603

**New Principal Place of Business:**

**Current Mailing Address:**

1620 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32603

**New Mailing Address:**

FEI Number: 59-2440094

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OLANDER, WILLIAM  
1620 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32603 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: OLANDER, WILLIAM  
Address: 3931 NW 40TH CT  
City-St-Zip: GAINESVILLE, FL 32606

Title: D  
Name: OLANDER, LINDA  
Address: 3931 NW 40TH CT  
City-St-Zip: GAINESVILLE, FL 32606

Title: D  
Name: FINCHER, JOE N.  
Address: 4072 N.W. 37TH. TR.  
City-St-Zip: GAINESVILLE, FL 32606

Title: D  
Name: FINCHER, DAWN  
Address: 4072 N.W. 37TH. TR.  
City-St-Zip: GAINESVILLE, FL 32606

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM OLANDER

PD

03/24/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date