2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000106

Entity Name: GAINESVILLE P'NAI OR, INC.

FILED Jan 18, 2010 Secretary of State

Date

Current Principal Place of Business: New Principal Place of Business:

8519 NW 4TH PLACE GAINESVILLE, FL 32607

Current Mailing Address: New Mailing Address:

PO BOX 358721 PO BOX 358721

GAINESVILLE, FL 32635 US

FEI Number: 30-0021180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NEIMS, ALLEN H 8519 NW 4TH PLACE GAINESVILLE FL 32607

GAINESVILLE, FL 32607 US

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

OFFICERS AND DIRECTORS:

Title: [

Name: HOFFINGER, RENEE Address: 4336 NW 27TH TERRACE City-St-Zip: GAINESVILLE, FL 32605

Title: D

 Name:
 FISCHER, ALAN

 Address:
 3525 NW 25TH AVE

 City-St-Zip:
 GAINESVILLE, FL 32605

Title: D

 Name:
 SOSNOW, KAYLA

 Address:
 909B NW 6TH STREET

 City-St-Zip:
 GAINESVILLE, FL 32601

Title:

 Name:
 EISENBERG, MARILYN

 Address:
 8620-261 NW 13TH STREET

 City-St-Zip:
 GAINESVILLE, FL 32653

Title: D

 Name:
 NEIMS, ALLEN DR.

 Address:
 8519 NW 4TH PL

 City-St-Zip:
 GAINESVILLE, FL 32607

Title: [

Name: WILSON, JUDITH
Address: 937 NW 40TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

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: ALLEN H NEIMS DR 01/18/2010