2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0100003228

1. Entity Name

8TH AVENUE PROFESSIONAL BUILDING ASSOCIATION, IN



FILED Mar 12, 2003 8:00 am Secretary of State

03-12-2003 90069 013 ****61.25

C.						No. 1. E. T. S.					
·				ling Address NW 8TH AVENUE							
				GAINESVILLE FL 32605							
			[n 14-	::							
2. Principal Place of Business 3. M				Mailing Address							
Suite, Apt. #, etc.			Sı	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State			Ci	City & State			4. FEI Number 59-3722982			Applied For Not Applicable	
Zip Country			Zi	Zip Country			5. Certificate of Status Desired				
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
		"				Name					
MURPHY, MELISSA J 703 NE 1ST STREET						Street Address (P.O. Box Number is Not Acce					
GAINESVILLE FL 32601						÷					
•				City					FL Zip	Code	1
	named entity	submits this statement for	or the purp	pose of changing its re	egistered	office or registe	ered agent, or both, in the	ne State of Florida.	I am familiar	with, a	and accept
ano obligat											}
SIGNATURE .	Signature, typed to	or printed name of registered agent	and title if ap	plicable. (NOTE:	Registered A	gent signature require	ed when reinstating)		DATE		
	· 新克里 · ·	· · · · · · · · · · · · · · · · · · ·	-								
FILE NOW: FEE IS \$61.25 9. Election Campaign F							\$5.00 May Be Added to Fees		Check Paya		
A STAN SAN SAN SAN SAN SAN SAN SAN SAN SAN S				Trust Fund Contribution.			Added to Fees	Fiorida L	epartment	01.5	tate
10.	l nn	OFFICERS AND DI	RECTORS		11.	<u> </u>	ADDITIONS/CHANGE	S TO OFFICERS A			
JITLE NAME	DP TONNER, .	IOSEPH A		☐ Delete	TITLE NAME				☐ Cha	ange	☐ Addition
STREET ADDRESS	4741 NW 8	ITH AVENUE				ADORESS					}
CITY-ST-ZIP	GAINESVIL DV	LE FL 32605			CITY-S	T- ZIP					D Addition
TITLE NAME	ROZBORIL, MICHAEL B			☐ Delete TITL NAM					☐ Cha	ange	Addition
STREET ADDRESS		TH AVENUE			STREET	ADDRESS					1
CITY-ST-ZIP		LE FL 32605			CITY-S	T-ZIP					
TITLE NAME	DST CAMACHO	JORGE R		☐ Delete	TITLE				☐ Cha	ange	☐ Addition
STREET ADDRESS		TH AVENUE				ADDRESS					
CITY-ST-ZIP	GAINESVIL	LE FL 32605		·····	CITY-S	T-ZIP		•			
TITLE NAME				Delete .	TITLE NAME	1			☐ Cha	ange	☐ Addition
STREET ADDRESS				•		ADDRESS					
CITY-ST-ZIP					CITY-\$	T-ZIP					
TITLE				Delete	TITLE				☐ Cha	ange	Addition
NAME STREET ADDRESS					NAME STREET	ADDRESS					Ì
CITY-ST-ZIP					CITY-S						
TITLE				☐ Delete	TITLE		ş.'		☐ Cha	ange	Addition
NAME STREET ADDRESS					NAME STREET	ADDRESS					
CITY-ST-ZIP					CITY-S						
12 Lhoroby	portific that the	information supplied with	n this filins	door not qualify for t	tha ayamı	ation stated in S	oction 119 07/3Vi) Elec	ida Statutos, I furti	her certify that	the in	formation

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _

A SIGNATAWAS A EM. ORED

2/25/03

(352)315-030