

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2007 08:00 A
Secretary of State

DOCUMENT # N03000001118

1. Entity Name
GAINESVILLE ELITE BASKETBALL ASSOCIATION INC.



Principal Place of Business
**2701 NW 57TH PLACE
GAINESVILLE, FL 32653**

Mailing Address
**2701 NW 57TH PLACE
GAINESVILLE, FL 32653**



03222007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0673784

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BENNETT, KAREN
2701 NW 57TH PLACE
GAINESVILLE, FL 32653**

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MAREN, MIKE
STREET ADDRESS	7914 SW 13TH ROAD
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	VP
NAME	STOKES, KEITH
STREET ADDRESS	22640 SE 60TH PLACE
CITY-ST-ZIP	HAWTHORNE, FL 32640
TITLE	T
NAME	BENNETT, KAREN
STREET ADDRESS	2701 NW 57TH PLACE
CITY-ST-ZIP	GAINESVILLE, FL 32653
TITLE	S
NAME	STOVER, JONNAQUE MARC
STREET ADDRESS	1131 NE 31ST AVE.
CITY-ST-ZIP	GAINESVILLE, FL 32609
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000696885
04/18/07-80017-010 70.00

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IN THIS SPACE**

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: Karen Bennett Karen Bennett 4/3/07 352-316-6347

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #