2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# N04485

Entity Name: ALACHUA COUNTY YOUTH FAIR AND LIVESTOCK SHOW ASSOCIATION, INC.

Current Principal Place of Business:

2800 NE 39TH AVENUE
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

PO BOX 358486
GAINESVILLE, FL 32635

New Mailing Address:

FEI Number: 59-2319316 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURNHAM, STELLA
22202 OLD PROVIDENCE RD.
ALACHUA, FL 32615 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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	ODOM, DONNIE	
Address:	12538 NW 104TH LANE	
City-St-Zip:	ALACHUA, FL 32615	
Title:	D	( ) Delete
Name:	TAYLOR, SCOTT	
Address:	16401 NW 78TH AVE	
City-St-Zip:	ALACHUA, FL 32615	
Title:	V	( ) Delete
Name:	HINES, DAVID	
Address:	1019 NE 90TH AVE	
City-St-Zip:	HIGH SPRINGS, FL 32643	
Title:	P	( ) Delete
Name:	HALE, GUY	
Address:	15701 NW 278TH AVE	
City-St-Zip:	ALACHUA, FL 32615	
Title:	S	( ) Delete
Name:	DAVIS, SHANNA	
Address:	15419 S BOUNDRY ST	
City-St-Zip:	ARCHER, FL 32618	
Title:	T	( ) Delete
Name:	BURNHAM, STELLA	
Address:	22202 OLD PROVIDENCE RD	
City-St-Zip:	ALACHUA, FL 32615	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: STELLA BURNHAM T 04/27/2005
Electronic Signature of Signing Officer or Director — Date