

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002175

FILED  
Apr 14, 2006  
Secretary of State

Entity Name: CATALYST GAINESVILLE, INC.

**Current Principal Place of Business:**

11527 NW 8TH LANE  
GAINESVILLE, FL 32606 US

**New Principal Place of Business:**

**Current Mailing Address:**

5200 NW 43RD ST., STE 102-343  
GAINESVILLE, FL 32606

**New Mailing Address:**

FEI Number: 20-2430416

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FEDERAL ACCOUNTANTS AND TAX CONSULTANTS  
3706 NW 43 STREET  
GAINESVILLE, FL 32606 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: P ( ) Delete  
Name: TAYLOR, SEAN C  
Address: 11527 NW 8TH LANE  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: ST ( ) Delete  
Name: TAYLOR, HEADLEY B  
Address: 6014 NW 33RD ST.  
City-St-Zip: GAINESVILLE, FL 32653 US

Title: D ( ) Delete  
Name: BLACK, JOSEPH E II  
Address: 3706 NW 43RD ST  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: D ( ) Delete  
Name: FRANCIS, ROBERT  
Address: 6060 SE 60TH AVE.  
City-St-Zip: TRENTON, FL 32693

Title: D ( ) Delete  
Name: MASSIAS, DAVID  
Address: 9784 SW 52ND RD  
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete  
Name: REID, RANDALL  
Address: 8211 SW 16TH PLACE  
City-St-Zip: GAINESVILLE, FL 32607

**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 Chapter 119, 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: HEADLEY TAYLOR

ST

04/14/2006

Electronic Signature of Signing Officer or Director

Date