

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

03-15-2006 90107 033 ****61.25

DOCUMENT # N05000004994

1. Entity Name
GILCHRIST COUNTY COMMUNITY FOUNDATION, INC.



Principal Place of Business
**450 PLEASANT GROVE RD
INVERNESS, FL 34452**

Mailing Address
**450 PLEASANT GROVE RD
INVERNESS, FL 34452**

66009412



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03282006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
20-4643647

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LONGHOUSE, DONNA L
501 E KENNEDY BLVD STE 1700
TAMPA, FL 33602**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete
***SEE ATTACHED LIST**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
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CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

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CITY - ST - ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert E. McCracken

Date

Daytime Phone #

ATTACHMENT

66009412

#N05000004994

TITLE	NAME	STREET ADDRESS	CITY/STATE/ZIP
President	Robert C. Wardlow, III	450 Pleasant Grove Road	Inverness, FL 34452
Executive Director	Robert E. McCranie, III	450 Pleasant Grove Road	Inverness, FL 34452
Treasurer/Secretary	J. Paul Cash	450 Pleasant Grove Road	Inverness, FL 34452
Director	Karen L. Thurman	9067 SW Blue Run Drive	Dunnellon, FL 34432
Director	Chester V. Cole	130 Heights Avenue	Inverness, FL 34452
Director	Dr Stephen W. Alcorn	2837 Circle Drive	Inverness, FL 34450
Director	Wann V. Robinson	2305 Highway 44 West	Inverness, FL 34453