


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 04, 2008 8:00 am**  
**Secretary of State**

02-04-2008 90042 036 \*\*\*\*70.00

<b>DOCUMENT # N07000004782</b>					
<b>1. Entity Name</b> GAINESVILLE OPPORTUNITY CENTER, INC.					
<b>Principal Place of Business</b> 7257 NW 4TH BLVD #318 GAINESVILLE, FL 32607			<b>Mailing Address</b> 7257 NW 4TH BLVD #318 GAINESVILLE, FL 32607		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 20-8823721	
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/>				<b>Applied For</b> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b> DEMERS, MICHAEL J <del>7257 NW 4TH BLVD #318</del> GAINESVILLE, FL 32607				<b>7. Name and Address of New Registered Agent</b> Name: <u>SAME</u> Street Address (P.O. Box Number is Not Acceptable): <u>617 SW 83rd Terr</u> <u>Gainesville, FL</u> City: <u>FL</u> Zip Code: <u>32607</u>	
<b>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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> STEVENS, BRUCE <input type="checkbox"/> Delete 6225 NW 54 WAY GAINESVILLE, FL 32653		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> OSBORNE, DEBRA <input checked="" type="checkbox"/> Delete 708-B SW 67TH TERR GAINESVILLE, FL 32607		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> SANDY CALLAN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 619 SW 68TH TERRACE, APT. B GAINESVILLE, FL 32607	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> SPEILLER, JEFF <input type="checkbox"/> Delete 1049 NW 90TH DR GAINESVILLE, FL 32606		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>TREASURER</b> TRISH SOKOL <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4641 CLEAR LAKE DR. GAINESVILLE, FL 32607	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>M</b> MICHAEL J. DEMERS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 617 SW 83rd Terrace Gainesville, FL 32607	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>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.</b>					
<b>SIGNATURE:</b> <u>Michael J Demers</u>			<u>Michael J. Demers</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <u>1/30/2008</u> Daytime Phone #: <u>(352) 224-5523</u>		