

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 05, 2009
Secretary of State**

DOCUMENT# N08000007561

Entity Name: TOWER 24 COMMUNITY CENTER CORPORATION

Current Principal Place of Business:

7600 SW 24TH AVENUE
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

C/O ALISON LAW
4524 SW 105 DRIVE
GAINESVILLE, FL 32608 US

New Mailing Address:

FEI Number: 26-3006116 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HANCOCK, JOE
7515 SW 24TH AVENUE
GAINESVILLE, FL 32607 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: PRES () Delete
Name: LAW, ALISON
Address: 4524 SW 105 DRIVE
City-St-Zip: GAINESVILLE, FL 32608 US

Title: VPRES () Delete
Name: HANCOCK, JOE
Address: 7515 SW 24TH AVENUE
City-St-Zip: GAINESVILLE, FL 32607 US

Title: TREA () Delete
Name: RILEY, MIKE
Address: 25 SW 101ST COURT
City-St-Zip: GAINESVILLE, FL 32607 US

Title: SECT () Delete
Name: KING, ALEX
Address: 101 NW 75TH STREET
City-St-Zip: GAINESVILLE, FL 32607 US

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:

I hereby certify that the information supplied with this filing does not qualify 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: ALISON LAW

Electronic Signature of Signing Officer or Director

PRES

05/05/2009

_____ Date