

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000006890

**FILED**  
**Jan 16, 2012**  
**Secretary of State**

**Entity Name:** GAINESVILLE KINGS BASKETBALL ASSOCIATION INC.

**Current Principal Place of Business:**

1126 NE 21ST STREET  
GAINESVILLE, FL 32641 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 358164  
GAINESVILLE, FL 326358164

**New Mailing Address:**

**FEI Number:** 27-0559122

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARNES, JOHN M  
1015 NW 21ST AVENUE  
APARTMENT 508  
GAINESVILLE, FL 32609 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:** PD  
**Name:** COLEMAN, THEO  
**Address:** 1101 NW 39TH AVENUE  
**City-St-Zip:** GAINESVILLE, FL 32605 US

**Title:** VPD  
**Name:** PENNY, PATRICK  
**Address:** 1126 NE 21ST STREET  
**City-St-Zip:** GAINESVILLE, FL 32641 US

**Title:** TD  
**Name:** BARNES, JOHN M  
**Address:** 1015 NW 21ST AVENUE APT 508  
**City-St-Zip:** GAINESVILLE, FL 32609 US

I hereby 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 all other like empowered.

**SIGNATURE:** JOHN MICHAEL BARNES

TD

01/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date