## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR MRECTOR

## May 31, 2001 8:00 am Secretary of State DOCUMENT # N35650 1. Entity Name 04-27-2001 90288 020 \*\*\*\*61.25 DANSCOMPANY OF GAINESVILLE, INC. Principal Place of Business Mailing Address 62 5001 NW 34 STREET 5001 NW 34 STREET GAINESVILLE FL 32605 GAINESVILLE FL 32805 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3028404 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SAIER, FRANK P. 3426 NW 43 ST **GAINESVILLE FL 32601** City Zip Code 8. The above named entity submits this statement for the purpose of changing its reg stered office or registered agent, or both, in the state of Florida. DATE (NOTE: Re jistered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to FILE NOW: 9. Election Campaign Fir ancing \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS SD Delete ☐ Change ■ Addition TITLE TITLE MCCOLOUGH, KIMBERLY NAME MARKE STREET ADDRESS STREET ADDRESS 7606 NW 44TH PLACE CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL TD-TREASURER/DIRECTOR ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME SAIER, PENNY STREET ADDRESS 6410 N.W. 56TH LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GAINESVILE FL DIRECTOR Change ☐ Addition TITLE TITLE Jelete BIRD, JANICE NAME NAME 6218 NW 43 RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **GAINESVILLE FL 32606** CITY-ST-7IP Prosident-D Change Addition TITLE ☐ Delete TITLE Melissa Gerhardt NAME NAME STREET ADDRESS STREET ADDRESS 3614 NW 30th Place CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL 326 TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIF 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 PennyJSaler lasurer 352378-5401

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