

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35805

**FILED**  
**Apr 02, 2010**  
**Secretary of State**

**Entity Name:** GAINESVILLE DISTRICT DIETETIC ASSOCIATION, INC.

**Current Principal Place of Business:**

500 E UNIVERSITY AVE., SUITE A  
POST OFFICE DRAWER 2759  
GAINESVILLE, FL 326025729

**New Principal Place of Business:**

**Current Mailing Address:**

500 E UNIVERSITY AVE., SUITE A  
POST OFFICE DRAWER 2759  
GAINESVILLE, FL 326025729

**New Mailing Address:**

**FEI Number:** 59-0458709

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SALZMAN, ANTHONY J ESQ.  
500 E UNIVERSITY AVE., SUITE A  
GAINESVILLE, FL 32602 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  
Name: YOUMANS, SHARI  
Address: 5541 SE 35TH STREET  
City-St-Zip: OCALA, FL 34480 US

Title: P EL  
Name: EPLING, JEAN  
Address: 3722 NW 16TH BLVD.  
City-St-Zip: GAINESVILLE, FL 32605 US

Title: SECY  
Name: SNYDER, LYDIA  
Address: 925 NW 22ND ST.  
City-St-Zip: GAINESVILLE, FL 32603 US

Title: TREA  
Name: RAMPERSAUD, GAIL  
Address: 2254 NW 3RD PLACE  
City-St-Zip: GAINESVILLE, FL 32603 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: GAIL C. RAMPERSAUD

TREA

04/02/2010

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

\_\_\_\_\_  
Date