

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42017

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: GAINESVILLE WILDERNESS INSTITUTE, INC.

## Current Principal Place of Business:

100 SE 134TH AVE  
MICANOPY, FL 32667 US

## New Principal Place of Business:

## Current Mailing Address:

ASSOCIATED MARINE INSTITUTES  
5915 BENJAMIN CENTER DR.  
TAMPA, FL 33634 US

## New Mailing Address:

FEI Number: 59-3048922      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIDSON, JOHN  
100 SE 134TH AVE.  
MICANOPY, FL 32667 US

## Name and Address of New Registered Agent:

HULL, DAVID J  
SMITH, HULSEY & BUSEY  
225 WATER STREET, STE 1800  
JACKSONVILLE, FL 32202 US

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: DAVID J. HULL

02/25/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: BM ( ) Delete  
Name: FISCHER, JOSH  
Address: 100 SE 134TH AVENUE  
City-St-Zip: MICANOPY, FL 32667

Title: VC ( ) Delete  
Name: KELLY, KRIS  
Address: 100 SE 134TH AVENUE  
City-St-Zip: MICANOPY, FL 32667

Title: VP ( ) Delete  
Name: STEVENSON, JOHN  
Address: 85 SW 52ND AVE  
City-St-Zip: OCALA, FL 34474

Title: C ( ) Delete  
Name: FLETCHER, IAN  
Address: 100 SE 134TH AVENUE  
City-St-Zip: MICANOPY, FL 32667

Title: RD ( ) Delete  
Name: THORNTON, MIKE  
Address: 100 SE 134TH AVENUE  
City-St-Zip: MICANOPY, FL 32667

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition  
Name: FLETCHER, IAN  
Address: 300 E. UNIVERSITY AVENUE, SUITE 100  
City-St-Zip: GAINESVILLE, FL 32601

Title: VC (X) Change ( ) Addition  
Name: STEVENSON, JOHN  
Address: 9323 SW 53RD LANE  
City-St-Zip: GAINESVILLE, FL 32608

Title: D (X) Change ( ) Addition  
Name: FISCHER, JOSH  
Address: 201 E. UNIVERSITY AVENUE, SUITE 400  
City-St-Zip: GAINESVILLE, FL 32601

Title: D (X) Change ( ) Addition  
Name: LALONDE, RICH  
Address: P.O. BOX 1210  
City-St-Zip: GAINESVILLE, FL 32602

Title: D (X) Change ( ) Addition  
Name: STANDER, O.B.  
Address: 5915 BENJAMIN CENTER DRIVE  
City-St-Zip: TAMPA, FL 33634

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: O.B. STANDER

D

02/25/2009

Electronic Signature of Signing Officer or Director

Date