

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000118

FILED  
Apr 01, 2008  
Secretary of State

**Entity Name:** GAMBLE ROGERS MEMORIAL FOUNDATION, INC.

**Current Principal Place of Business:**

203 SW 3RD AVENUE  
GAINESVILLE, FL 32601 US

**New Principal Place of Business:**

**Current Mailing Address:**

203 SW 3RD AVE.  
GAINESVILLE, FL 32601 US

**New Mailing Address:**

203 SW 3RD AVENUE  
GAINESVILLE, FL 32601 US

**FEI Number:** 59-3158435

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEADHAM, CHARLES V JR  
203 SW 3RD AVE  
GAINESVILLE, FL 32601 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: D ( ) Delete  
Name: BLOUNT, ROB  
Address: P O BOX 1314  
City-St-Zip: TAMPA, FL 336011314

Title: D ( ) Delete  
Name: CRIDER, DALE  
Address: 11620 NE 7TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32641

Title: D ( ) Delete  
Name: MCEWAN, BRUCE  
Address: 2000 WEST ALAMEDA AVE.  
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete  
Name: FETHE, HAROLD  
Address: 124 SPYGLASS LANE  
City-St-Zip: HALF MOON BAY, CA 94019

Title: D ( ) Delete  
Name: ROGERS, JACK  
Address: 1002 TEMPLE GROVE  
City-St-Zip: WINTER PARK, FL

Title: D ( ) Delete  
Name: HAMILTON, GEORGE IV  
Address: 2020 FIELDSTONE PARKWAY, SUITE 900-96  
City-St-Zip: FRANKLIN, TN 37069

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: BLOUNT, ROB  
Address: 4020 VIRGINIA BEACH DRIVE  
City-St-Zip: MIAMI, FL 33149

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:

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: CHARLES V. STEADHAM, JR.

OFFI

04/01/2008

Electronic Signature of Signing Officer or Director

Date