

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001985

FILED
Apr 30, 2009
Secretary of State

Entity Name: GATORTOWN GATORS, INC.

Current Principal Place of Business:

PO BOX 90255
GAINESVILLE, FL 32607 US

New Principal Place of Business:

156 TURKEY CREEK
ALACHUA, FL 32615 US

Current Mailing Address:

PO BOX 90255
GAINESVILLE, FL 32607 US

New Mailing Address:

156 TURKEY CREEK
ALACHUA, FL 32615 US

FEI Number: 59-3105832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRISN, JAMES
156 TURKEY CREEK
GAINESVILLE, FL 32615 US

Name and Address of New Registered Agent:

PARRISN, JAMES
156 TURKEY CREEK
GAINESVILLE, FL 32615 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: JAMES PARRISH

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VIERLING, RALPH
Address: 286 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

Title: TD () Delete
Name: JETER, RICHARD
Address: 2127 SW 122ND ST.
City-St-Zip: GAINESVILLE, FL 32607

Title: PPD () Delete
Name: BUBY, TOM
Address: P.O. BOX 13004
City-St-Zip: GAINESVILLE, FL 32604

Title: S () Delete
Name: BUBY, LINDA
Address: P.O. BOX 13004
City-St-Zip: GAINESVILLE, FL 32604

Title: ATD () Delete
Name: PARRISN, JAMES
Address: 156 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VANDIVER, FRANCES
Address: 9715 NW 63RD LANE
City-St-Zip: GAINESVILLE, FL 32653

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PPD (X) Change () Addition
Name: VIERLING, RALPH
Address: 286 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

Title: SEC (X) Change () Addition
Name: BUBY, LINDA
Address: 2127 SW 122ND STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: ATD (X) Change () Addition
Name: PARRISH, JAMES
Address: 156 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

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: JAMES PARRISH

ATD

04/30/2009

Electronic Signature of Signing Officer or Director

Date