2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004
Secretary of State

DOCUMENT# N93000002808

Entity Name: GAINESVILLE ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS, INC.

Current Principal Place of Business:

3620 NW 43RD STREET
SUITE A
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

3620 NW 43RD STREET
SUITE A
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-2767926 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASHLEY, DAVID
3620-A N.W. 43RD STREET
GAINESVILLE, FL 32606

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: PD ( ) Delete
Name: WHITED, ROD
Address: 3620 NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32606

Title: PED ( ) Delete
Name: ASHLEY, DAVID
Address: 3620-A NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32606

Title: T ( ) Delete
Name: HARRIS, MARION
Address: 6110-D NW 1ST PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: VP ( ) Delete
Name: MORRISON, JOHN
Address: 2950 S.W. ARCHER RD, SUITE D
City-St-Zip: GAINESVILLE, FL 32608

Title: DNC ( ) Delete
Name: ROSENBLATT, HOWARD
Address: 2830 NW 41ST STREET, SUITE J
City-St-Zip: GAINESVILLE, FL 32606

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: ASHLEY, DAVID W
Address: 3620 NW 43RD STREET, S-A
City-St-Zip: GAINESVILLE, FL 32606

Title: VP (X) Change ( ) Addition
Name: CHESHIRE, RICHARD W JR.
Address: 3625230-B SW 91ST DRIVE
City-St-Zip: GAINESVILLE, FL 32608

Title: VP (X) Change ( ) Addition
Name: MACDONALD, TRAVIS L
Address: 613324 WEST UNIVERSITY AVE
City-St-Zip: GAINESVILLE, FL 32607

Title: TREA (X) Change ( ) Addition
Name: WEINKLE, ANITA M
Address: 3008 NW 13 STREET,S-G
City-St-Zip: GAINESVILLE, FL 326089-28

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

Title: ESEC ( ) Change (X) Addition
Name: ASHLEY, KAREN R
Address: 3620 NW 43RD STREET, S-A
City-St-Zip: GAINESVILLE, FL 32606

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID W ASHLEY PRES 05/03/2004

Electronic Signature of Signing Officer or Director — Date