

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002808

FILED
Feb 10, 2009
Secretary of State

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

Current Principal Place of Business:

2700-A NW 43RD STREET
GAINESVILLE, FL 32606 US

New Principal Place of Business:

4010 NW 45TH PLACE
GAINESVILLE, FL 32606 US

Current Mailing Address:

POST OFFICE BOX 357728
GAINESVILLE, FL 326357728

New Mailing Address:

POB 357728
GAINESVILLE, FL 32635 US

FEI Number: 59-3759070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSSI, WJ
2700-A NW 43RD STREET
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

SHAMIS, JEFF D
250-B1 NW 76TH DRIVE
GAINESVILLE, FL 32607 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: JEFF D. SHAMIS

02/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSSI, WJ
Address: 2700-A NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32606 US

Title: VP () Delete
Name: GRACY, DAVID JR
Address: 2636 NW 41ST STREET, SUITE D-2
City-St-Zip: GAINESVILLE, FL 32606

Title: ESEC () Delete
Name: KERN, MARTHA
Address: 1116 NW 60TH TERRACE
City-St-Zip: ALACHUA, FL 32615

Title: T () Delete
Name: GRACY, DAVID JR
Address: 2630 NW 41ST STREET
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GRACY, DAVID JR.
Address: 4010 NW 45TH PLACE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: VP (X) Change () Addition
Name: KERN, MARTHA
Address: 11116 NW 60TH TERRACE
City-St-Zip: GAINESVILLE, FL 32615 US

Title: TREA (X) Change () Addition
Name: SHAMIS, JEFF D
Address: 250-B1 NW 76TH DRIVE
City-St-Zip: GAINESVILLE, FL 32607 US

Title: SEC (X) Change () Addition
Name: CREWS, LINDY
Address: 200 NW 122ND ST
City-St-Zip: GAINESVILLE, FL 32607 US

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: JEFF D. SHAMIS

TREA

02/10/2009

Electronic Signature of Signing Officer or Director

Date