

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003760

FILED
Jan 31, 2009
Secretary of State

Entity Name: HUMAN RIGHTS COUNCIL OF NORTH CENTRAL FLORIDA, INC.

Current Principal Place of Business:

BOX 2112
GAINESVILLE, FL 32602

New Principal Place of Business:

Current Mailing Address:

BOX 2112
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 59-3197793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARP, ROBERT
1101 NW 43 AVE.
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

KARP, ROBERT
1101 NW 43RD AVE
GAINESVILLE, FL 32609 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: ROBERT KARP

01/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EICHNER, SUE
Address: 9772 SW 52 RD.
City-St-Zip: GAINESVILLE, FL 32608

Title: TD () Delete
Name: MARTIN, TIM
Address: 10430 SW 12TH TERR.
City-St-Zip: MICANOPY, FL 32667

Title: VPD () Delete
Name: KARP, ROBERT
Address: 1101 NW 43 AVE.
City-St-Zip: GAINESVILLE, FL 32609

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EICHNER, SUSAN
Address: 9772 SW 52ND RD
City-St-Zip: GAINESVILLE, FL 32608

Title: TD (X) Change () Addition
Name: MARTIN, TIMOTHY
Address: 10430 SW 12TH TER
City-St-Zip: MICANOPY, FL 32667

Title: SD (X) Change () Addition
Name: KARP, ROBERT
Address: 1101 NW 43RD AVE
City-St-Zip: GAINESVILLE, FL 32609

Title: VPD () Change (X) Addition
Name: FLEMING, TERENCE
Address: PO BOX 6024
City-St-Zip: GAINESVILLE, FL 32627

Title: D () Change (X) Addition
Name: MERRITT, JEREMY
Address: 1245 NE 18TH AVE
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Change (X) Addition
Name: MEEK, PHYLLIS
Address: 8421 SW 152ND AVE
City-St-Zip: ARCHER, FL 32618

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: TIMOTHY MARTIN

TD

01/31/2009

Electronic Signature of Signing Officer or Director

Date