

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005095

FILED
Apr 22, 2004
Secretary of State**Entity Name:** CIVIC MEDIA CENTER AND LIBRARY, INC.**Current Principal Place of Business:**1021 W. UNIVERSITY AVE.
GAINESVILLE, FL 32601 US**New Principal Place of Business:****Current Mailing Address:**1021 W. UNIVERSITY AVE.
GAINESVILLE, FL 32601 US**New Mailing Address:****FEI Number:** 59-3208635**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LUDWIG, HARRIET
1810 NW 23RD BLVD
SUITE 276
GAINESVILLE, FL 32605 US**Name and Address of New Registered Agent:**BISHOP, SHEILA
319 NW 15TH AVE. □□
GAINESVILLE, FL 32601 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: SHEILA BISHOP

04/22/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: COURTER, JOSEPH
Address: 1527 NE 73RD ST.
City-St-Zip: GAINESVILLE, FL**Title:** TD () Delete
Name: WILLETT, CHARLES
Address: 1716 SW WILLISTON RD.
City-St-Zip: GAINESVILLE, FL**Title:** D () Delete
Name: STAHMER, PAULA
Address: 4621 CLERK LAKE DR
City-St-Zip: GAINESVILLE, FL 32608**Title:** D () Delete
Name: BOYLES, LINDA
Address: 308 NE 8TH AVE
City-St-Zip: GAINESVILLE, FL 32601**Title:** D () Delete
Name: STEPHENSON, BILL
Address: 2019 NE 31ST TERR
City-St-Zip: GAINESVILLE, FL 32605**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: COURTER, JOSEPH
Address: 1527 NE 73RD ST.
City-St-Zip: GAINESVILLE, FL 32641**Title:** D (X) Change () Addition
Name: WILLETT, CHARLES
Address: 1716 SW WILLISTON RD.
City-St-Zip: GAINESVILLE, FL 32608**Title:** D (X) Change () Addition
Name: STAHMER, PAULA
Address: 4621 CLERK LAKE DR
City-St-Zip: GAINESVILLE, FL 32607**Title:** D (X) Change () Addition
Name: LUDWIG, HARRIETT
Address: 1810 NW 23RD BLVD.
City-St-Zip: GAINESVILLE, FL 32605**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** TD () Change (X) Addition
Name: BISHOP, SHEILA
Address: 319 NW 15TH AVE. □□
City-St-Zip: GAINESVILLE, FL 32601

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: SHEILA BISHOP

TD

04/22/2004

Electronic Signature of Signing Officer or Director

Date

FERESHTEH EBRAHIMI, DIRECTOR
311 SW 27TH ST.
GAINESVILLE, FL 32607

MANUEL MARTINEZ, DIRECTOR
2221 NW 36TH DRIVE
GAINESVILLE, FL 32605