

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002355

FILED
Aug 20, 2008
Secretary of State

Entity Name: THE RESERVE HOMEOWNERS ASSOCIATION OF GAINESVILLE, INC.

Current Principal Place of Business:

7257 NW 4TH BLVD
BOX 220
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

7257 NW 4TH BLVD
BOX 220
GAINESVILLE, FL 32607 US

New Mailing Address:

FEI Number: 59-3249274 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WILSON, DAVID
2119 SW 78TH TERRACE
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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILSON, DAVID
Address: 2119 SW 78TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607

Title: TD () Delete
Name: SANCHEZ, IGNACIO
Address: 2013 SW 76TH TERR
City-St-Zip: GAINESVILLE, FL 32607

Title: SD () Delete
Name: TRAIL, GALEN
Address: 2027 SW 78TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: PRIDGEN, HELEN
Address: 2140 SW 78TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: RUDD, DERRICK
Address: 2011 SW 75TH TERRACE
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: IGNACIO SANCHEZ

TD

08/20/2008

Electronic Signature of Signing Officer or Director

Date