

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001970

FILED
Jan 21, 2006
Secretary of State

Entity Name: GAINESVILLE JUNIORS VOLLEYBALL CLUB, INC.

Current Principal Place of Business:

620 NW 16TH AVENUE
GAINESVILLE, FL 32601 US

New Principal Place of Business:

5931 NW 1ST PLACE
GAINESVILLE, FL 32607 US

Current Mailing Address:

P.O. BOX 1616
GAINESVILLE, FL 32602 US

New Mailing Address:

5931 NW 1ST PLACE
GAINESVILLE, FL 32607 US

FEI Number: 59-3313713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKIDMORE, ROBERT
8708 SW 61ST AVE
GAINESVILLE, FL 32608 US

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: PRES () Delete
Name: SKIDMORE, ROBERT
Address: 8708 61ST AVE.
City-St-Zip: GAINESVILLE, FL 32608

Title: VP () Delete
Name: DOYLE, CHRIS
Address: 8810 SW 45TH BLVD.
City-St-Zip: GAINESVILLE, FL 32608

Title: VP () Delete
Name: COOK, MARGO
Address: 6850 NW 40TH DRIVE
City-St-Zip: GAINESVILLE, FL 32653

Title: VP () Delete
Name: SCHAIVONE-ODOM, MARY
Address: 1409 SW 112TH ST.
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:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARGO B. COOK

VP

01/21/2006

Electronic Signature of Signing Officer or Director

Date