FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #
1. Corporation Name

N95000003596 (2)

EIGHTH JUDICIAL CIRCUIT BAR ASSOCIATION, INC.

LILLI
Feb 17 1998 8:00am
Secretary of State

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Principal Place of Business Mailing Address						
2622 NW 43RD GAINESVILLE F	ST., SUITE B-3 L 32606	PO BOX 127 GAINESVILLE FL 32602-0127			3. Date Incorporated or Qualified 07/28/1995	
		US			4. FEI Number Applied For S9-902 1912 Not Applicable	
2. Principal P	lace of Business	2a. Mailing Address			CO 75 Additional	
21 2790 N	W 43rd Street	26			5. Certificate of Status Desired Fee Required	
Suite, Apt 22 Suit	#, etc. e 200	Suite, Apt. #, etc.			Election Campaign Financing Trust Fund Contribution Added to Fees	
City & State	esville, FL	City & State			7. Is this nonprofit corporation a homeowners association?	
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year intangible	
24 23606			30			
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Registered Agent	
			81	Name /	/Scott David Krueger	
	R, SCOTT DAVID V 43RD ST., SUITE B-3		82	Street	Address (P.O. Box Number is Not Acceptable) 2790 NW 43rd Street	
	/ILLE FL 32606		83		Suite 200	
			84	City	Gainesville, FL 88 Zip Code 32606	
11. Pursuant	to the provisions of Sections 617.0502	2 and 617.1508, Florida Statutes	s, the above	-named	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
agent. I a	m familiar with and accept the onliga		ida Statutes	3.	poration's board of directors. Priorety accept the appointment as registered	
SIGNATURE	Signature, lyped or printed name of registered agen	of word loss it woods able (NOTE)	Buoistared Ace	ot signature	e required when reinstating) DATE	
12.	OFFICERS AND		13.	an angressore	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		D Change Addition	
NAME	MILLS, BETH B		1.2 NAME		John Stokes	
STREET ADDRESS	2700-C NW 43RD ST.		1.3 STREET	ADDRESS	20 S. Main Street	
CITY - ST - ZIP	GAINESVILLE FL	- Inches	1.4 CITY-ST-ZIP		Gainesville, FL 32601	
TITLE	DT CONT	☐ DELETE	2.1 TITLE		D Change Addition	
NAME	KRUEGER, SCOTT 7622 NW 43 ST STE B-3		2.2 NAME	4000000	Frank E. Maloney	
STREET ADDRESS CITY-ST-ZIP	GAINESVILLE FL		2.3 STREET 2. 4 City - S		5 W. Maccleany Ave	
TITLE	DS	DELETE	3.1 TITLE	51 - ZF	Macclenny, FL 32063 Change Addition	
NAME	TOMUNSON, DIANE		3.2 NAME			
STREET ADDRESS	10801 SW 24TH AVE		3.3 STREET	ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL 32607		3.4. CITY - 9	ST- Z IP		
TITLE	D	☐ DELETE	4.1 TITLE		Change Addition	
NAME	KNELLINGER, RICHARD M		4. 2 NAME			
STREET ADDRESS	2815 NW 13 ST STE 305		4.3 STREET			
CITY-ST-ZIP	GAINESVILLE FL DP	DELETE	4.4 CITY - S 5.1 TITLE	T-ZIP	Change Addition	
TITLE NAME	SPERLING, SHARON T	OLLET	5.1 INCE		L Change L Accident	
STREET ADDRESS	500-C E. UNIVERSITY AVE		5.3 STREET	ADDRESS		
CITY+ST-ZIP	GAINESVILLE FL		5.4 CITY-S			
TITLE	D	☐ DELETE	6.1 TITLE	7	☐ Change ☐ Addition	
NAME	HUSZAR, ARLENE		6.2 NAME			
STREET ADDRESS	1110-C NW 8TH AVE.		6.3 STREET	ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL 32601		6.4 CITY - S	T-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: