## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000003596

FILED Jan 16, 2009 Secretary of State

Entity Name: EIGHTH JUDICIAL CIRCUIT BAR ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 2830 NW 41 STREET SUITE C GAINESVILLE, FL 32606 **New Mailing Address: Current Mailing Address:** PO BOX 127 GAINESVILLE, FL 326020127 US FEI Number: 59-9021912 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPERLING, SHARON T 2830 NW 41 ST SUITE C GAINESVILLE, FL 32606 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete STACK, MARGARET STACK, MARGARET Name: Name: 120 W. UNIVERSITY AVENUE Address: 408 W UNIVERSITY AVE, STE 110B Address: City-St-Zip: GAINESVILLE, FL 32602 City-St-Zip: GAINESVILLE, FL 32601 US Title: () Delete Title: () Change () Addition Name: O'NEILL, REBECCA Name: Address: 720 SW 2ND AVE STE 360A Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: Title: () Delete Title: () Change () Addition SPERLING, SHARON Name: Name: 3830 NW 41 ST SUITE C Address: Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Name: Name: COLLINS, ELIZABETH Address: Address: 203 NE 1ST ST City-St-Zip: City-St-Zip: GAINESVILLE, FL 32601 US

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: SHARON T. SPERLING TD 01/16/2009