

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004679

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** THE INTERFAITH HOSPITALITY NETWORK OF GREATER GAINESVILLE, FLORIDA, INC.

**Current Principal Place of Business:**

229 S.W. 5TH STREET  
GAINESVILLE, FL 32601 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 880  
GAINESVILLE, FL 32602 US

**New Mailing Address:**

**FEI Number:** 59-3414493      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MCINNES, MARTHA  
229 S.W. 5TH STREET  
GAINESVILLE, FL 32601 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: D  
Name: SANDERS, SID  
Address: 6051 NW 19TH LN  
City-St-Zip: GAINESVILLE, FL 32605

Title: D  
Name: MUTCH, SAM  
Address: 2114 NW 40TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D  
Name: ROBINSON, LYNETTE  
Address: 1024 NE 16TH AVE.  
City-St-Zip: GAINESVILLE, FL 32609

Title: D  
Name: ERBES, JOY  
Address: 7107 NW 42ND LN  
City-St-Zip: GAINESVILLE, FL 32606

Title: D  
Name: FRANKS, KATHY  
Address: 8825 NE 108TH AVE  
City-St-Zip: GAINESVILLE, FL 32609

Title: D  
Name: MCCUNE, HELEN  
Address: 3838 SW 5TH PLACE  
City-St-Zip: GAINESVILLE, FL 32607

I hereby 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 all other like empowered.

SIGNATURE: MARTHA MCINNES

ED

01/05/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date