2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2008
Secretary of State

DOCUMENT# N96000005384

Entity Name: SUSTAINABLE ALACHUA COUNTY, INC.

Current Principal Place of Business:

300 EAST UNIVERSITY AVE.
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2772
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 59-3406094 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEPUYDT, DIANE
1245 NE 20TH PLACE
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

CANTWELL, KATHLEEN
400 NE 13 AVE
GAINESVILLE, FL 32601 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: KATHLEEN CANTWELL 03/12/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MARYNOWSKI, SUSAN
Address: 5111 SE 193RD TERRACE
City-St-Zip: HAWTHORNE, FL 32640

Title: DP ( ) Delete
Name: DEPUDT, DIANE
Address: 1245 NE 20TH PLACE
City-St-Zip: GAINESVILLE, FL 32609

Title: SD ( ) Delete
Name: MACKENZIE, MICKIE
Address: 2554 SW 14TH DR
City-St-Zip: GAINESVILLE, FL 32608

Title: TD ( ) Delete
Name: CANTWELL, KATHY MD
Address: 400 NE 13TH AVENUE
City-St-Zip: GAINESVILLE, FL 32601

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 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: KATHLEEN CANTWELL TREA 03/12/2008
Electronic Signature of Signing Officer or Director Date