

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004052

FILED
May 01, 2012
Secretary of State

Entity Name: SISTER CITY PROGRAM OF GAINESVILLE, INC.

Current Principal Place of Business:

5055 SW 91 TERRACE
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

5055 SW 91 TERRACE
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-3455491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALISHMAN, STEVEN J
5055 SW 91 TERRACE
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: P
Name: KALISHMAN, STEVEN J
Address: 9278 SW 61ST AVENUE
City-St-Zip: GAINESVILLE, FL 32608

Title: D
Name: ROTHSTEIN, PAUL S
Address: 2716 NW 22ND DR
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: FAKHOURY, MANAL
Address: 3110 SE 17TH CT
City-St-Zip: OCALA, FL 34471

Title: D
Name: WELLS, RANDOLPH
Address: 820 NE 5TH AVE
City-St-Zip: GAINESVILLE, FL 32601

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: STEVEN J. KALISHMAN

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date