
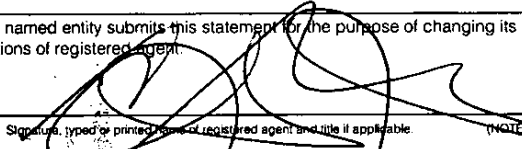
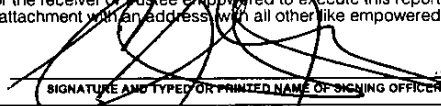


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2007 8:00 am**  
**Secretary of State**

05-03-2007 90041 025 \*\*\*\*70.00

<b>DOCUMENT # N97000006022</b> 1. Entity Name <b>ALACHUA COUNTY DAY, INC.</b>					
Principal Place of Business <b>926 NW 13TH ST ATTN: CLAY MARTIN GAINESVILLE, FL 32601</b>			Mailing Address <b>926 NW 13TH ST ATTN: CLAY MARTIN GAINESVILLE, FL 32601</b>		
2. Principal Place of Business - No P.O. Box # <b>851 NW 250th Terr.</b>		3. Mailing Address <b>P.O. Box 1170</b>			
Suite, Apt. #, etc. <b>Suite 3</b>		Suite, Apt. #, etc. 			
City & State <b>Newberry FL</b>		City & State <b>Newberry FL</b>			
Zip <b>32669</b>		Country <b>USA</b>		Zip <b>32669</b>	
Country <b>USA</b>		4. FEI Number <b>59-3477168</b>			
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>					
6. Name and Address of Current Registered Agent  <b>MARTIN, CLAY 135 NW 266TH STREET NEWBERRY, FL 32669</b>			7. Name and Address of New Registered Agent Name <b>Clay Martin</b> Street Address (P.O. Box Number is Not Acceptable) <b>851 NW 250th Terr. Suite 3</b> City <b>Newberry</b> <b>FL</b> Zip Code <b>32669</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  DATE <b>5/1/07</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SEAL, JANE 302 HWY 301 S. HAWTHORNE, FL 32640	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINTERS, SONIA 300 E UNIVERSITY AVE GAINESVILLE, FL 32601	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DAVIS, LOUIE 207 SW 4TH BLVD WALDO, FL 32694	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GLANZER, JOY 25050 W. NEWBERRY ROAD NEWBERRY, FL 32669	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MARTIN, CLAY <del>405 NW 206 STREET</del> NEWBERRY, FL 32669	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>851 NW 250th Terr. Suite 3 Newberry FL 32669</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT YORK, GUY 3000 NW 83RD ST BLDG F GAINESVILLE, FL 32606	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
<b>SIGNATURE:</b> 			<b>Clay Martin</b> Treasurer Date <b>5/1/07</b> Daytime Phone # <b>352-472-4131</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					