

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000007430

1. Entity Name

GREATER GAINESVILLE AREA ASSOCIATION FOR TECHNIC

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90037 028 ****70.00

Principal Place of Business

2606 N.E. 17TH TERR.
 GAINESVILLE FL 32609

Mailing Address

~~2606 N.E. 17TH TERR.~~
~~GAINESVILLE FL 32609~~

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 357913

City & State

City & State

Gainesville, FL

4. FEI Number

59-3615065

Applied For

Not Applicable

Zip

Country

Zip

Country

32635-7913

5. Certificate of Status Desired

☒ \$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GENTRY, JOHN E
 2602 NW 156TH AVE.
 GAINESVILLE FL 32609

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 CD
 MCGRAW, MICHAEL E
 2606 N.E. 17TH TERR.
 GAINESVILLE FL 32609 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 ST
 PAINTER, JERRY M
 2425 NE. 19TH DR.
 GAINESVILLE FL 32609 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 SD ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 TD
 GENTRY, JOHN E
 2602 NW 156 AVE.
 GAINESVILLE FL 32609 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 LESLIE, BRIAN
 2500 NE 18TH TERR.
 GAINESVILLE FL 32609 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 JAZEMBSKI, STEVE
 7005 NW 41 PLACE
 GAINESVILLE FL 32606 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Jarzembksi, Steve ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

John E. Gentry
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/2000
 Date

352 395-5251
 Daytime Phone #

CR2E037 (9/99)