

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000062778

FILED
Jul 11, 2008
Secretary of State

Entity Name: RADAR OF GAINESVILLE, INC.

Current Principal Place of Business:

940 NW 247TH DR
NEWBERRY, FL 32669

New Principal Place of Business:

Current Mailing Address:

940 NW 247TH DR
NEWBERRY, FL 32669

New Mailing Address:

FEI Number: 59-3680395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, LARRY R
940 NW 247TH DR
NEWBERRY, FL 32669 US

Name and Address of New Registered Agent:

COLUNDJIA, JOHN
940 NW 247TH DR
NEWBERRY, FL 32669 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: JOHN COLUNDJIA

07/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WATSON, LARRY R
Address: 940 NW 247TH DR
City-St-Zip: NEWBERRY, FL 32669

Title: S () Delete
Name: DABNEY, DOUGLAS H
Address: 940 NW 247TH DR
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY R. WATSON

P

07/11/2008

Electronic Signature of Signing Officer or Director

Date