

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 710221

**Entity Name:** THE ARC OF ALACHUA COUNTY, INC.**Current Principal Place of Business:**3303 NW 83RD ST.  
GAINESVILLE, FL 32606**Current Mailing Address:**3303 NW 83RD ST.  
GAINESVILLE, FL 32606**FEI Number: 59-1140179****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**DRAGO, STEVE  
3303 NW 83RD ST.  
GAINESVILLE, FL 32606 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name ROTHROCK, THOMAS  
Address 3134 NW 58TH BLVD  
City-State-Zip: GAINESVILLE FL 32606

Title PRESIDENT  
Name TANNER, STEPHEN  
Address 5700 SW 34TH ST  
City-State-Zip: GAINESVILLE FL 32608

Title CEO  
Name DRAGO, STEVE  
Address 3303 NW 83RD ST  
City-State-Zip: GAINESVILLE FL 32606

Title VP  
Name WILLIAMS, NAOMI  
Address 1513 NE 40TH PLACE  
City-State-Zip: GAINESVILLE FL 32609

Title DIRECTOR  
Name MEYROWITZ, RAYMOND  
Address 9432 SW 31ST LN  
City-State-Zip: GAINESVILLE FL 32608

Title SECRETARY  
Name GETS, LISPBETH  
Address 4601 NW 13TH AVE  
City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR  
Name WILLIAM, BILL N. DR.  
Address 1501 NW 46TH TERRACE  
City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR  
Name COSTELLO, CATHY A.  
Address 2525 NW 19TH WAY  
City-State-Zip: GAINESVILLE FL 32605

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*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: STEPHEN TANNER****PRESIDENT****02/14/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GARVEY, TIMOTHY DR.  
Address 5432 NW 38TH PLACE  
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR  
Name GROEB, ROBERT K. HON.  
Address 201 E. UNIVERISTY AVE., ROOM 304  
City-State-Zip: GAINESVILLE FL 32601

Title DIRECTOR  
Name ELCHERT, ADELE  
Address 3205 NW 83RD ST, APT. 1911  
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR  
Name PARKER, ERIC  
Address 4880 W. NEWBERRY RD., SUITE 100  
City-State-Zip: GAINESVILLE FL 32607

Title TREASURER  
Name DOERR, BEN  
Address 1411 NW 46TH TERRACE  
City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR  
Name BRASINGTON, MONICA HON.  
Address 201 E. UNIVERSITY AVE., ROOM 301  
City-State-Zip: GAINESVILLE FL 32601