

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750640

Entity Name: J. HILLIS MILLER HEALTH CENTER GIFT SHOP, INC.

Current Principal Place of Business:

BOX 100324
SHANDS TEACHING HOSPITAL & CLINICS
GAINESVILLE, FL 32610-0324

Current Mailing Address:

BOX 100324
SHANDS TEACHING HOSPITAL & CLINICS
GAINESVILLE, FL 32610-0324 US

FEI Number: 59-1984077

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIGGS, CHRISTINE
5025 NW 51ST PLACE
GAINESVILLE, FL 32606-4310 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: CHRISTINE RIGGS

03/04/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name RIGGS, CHRISTINE
Address 5025 NW 51ST PLACE
City-State-Zip: GAINESVILLE FL 32606-4310

Title SECRETARY
Name ALLEGRA, LINDA
Address 4147 SW 96TH DR
City-State-Zip: GAINESVILLE FL 32608

Title TREASURER
Name SMITH-VANIZ, ESTHER
Address 3218 NW 57TH TER
City-State-Zip: GAINESVILLE FL 32606

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: CHRISTINE RIGGS

PRESIDENT

03/04/2014

Electronic Signature of Signing Officer/Director Detail

Date