

2017 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:

GREATHOUSE, DANIEL GLEN
636 NE 10TH AVENUE
GAINESVILLE, FL 32601-4488 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: DANIEL G. GREATHOUSE

03/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GREATHOUSE, DANIEL GLEN
Address 636 NE 10TH AVENUE
City-State-Zip: GAINESVILLE FL 32601-4488

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

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

Title SECRETARY
Name YALE, CAROLINE
Address 8520 SW 99TH PLACE
City-State-Zip: GAINESVILLE FL 32608

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: DANIEL GLEN GREATHOUSE

PRESIDENT

03/13/2017

Electronic Signature of Signing Officer/Director Detail

Date