2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N00000002113

Entity Name: GAMBLE PLANTATION PRESERVATION ALLIANCE, INC.

Current Principal Place of Business:

3708 PATTEN AVE ELLENTON, FL 34222

Current Mailing Address:

3708 PATTEN AVE ELLENTON, FL 34222

FEI Number: 65-0997384

Name and Address of Current Registered Agent:

JESSEE, GAIL 3708 PATTEN AVE ELLENTON, FL 34222 US Jan 12, 2017 Secretary of State CC0392527198

Certificate of Status Desired: No

FILED

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

Officer/Director Detail :

Title	PD	Title	VD
Name	JESSEE, GAIL	Name	DALY, BEATRICE A
Address	3708 PATTEN AVE.	Address	3708 PATTEN AVE.
City-State-Zip:	ELLENTON FL 34222	City-State-Zip:	ELLENTON FL 33222
Title	SD	Title	TD
Name	WALKER, LORI	Name	DALY, ROBERT A
Address	3708 PATTEN AVE	Address	3708 PATTEN AVE.
City-State-Zip:	ELLENTON FL 34222	City-State-Zip:	ELLENTON FL 34222
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR HARTLIEB, JUNE	Title Name	DIRECTOR TRIPLETT, TRAVIS
Name	HARTLIEB, JUNE	Name	TRIPLETT, TRAVIS
Name Address City-State-Zip:	HARTLIEB, JUNE 6610 STONE RIVER ROAD BRADENTON FL 34203	Name Address	TRIPLETT, TRAVIS 10015 N. 25TH STREET
Name Address City-State-Zip: Title	HARTLIEB, JUNE 6610 STONE RIVER ROAD BRADENTON FL 34203 DIRECTOR	Name Address City-State-Zip:	TRIPLETT, TRAVIS 10015 N. 25TH STREET TAMPA FL 33612
Name Address City-State-Zip: Title Name	HARTLIEB, JUNE 6610 STONE RIVER ROAD BRADENTON FL 34203 DIRECTOR SILPA, FELICIA	Name Address City-State-Zip: Title	TRIPLETT, TRAVIS 10015 N. 25TH STREET TAMPA FL 33612 DIRECTOR
Name Address City-State-Zip: Title Name Address	HARTLIEB, JUNE 6610 STONE RIVER ROAD BRADENTON FL 34203 DIRECTOR	Name Address City-State-Zip: Title Name	TRIPLETT, TRAVIS 10015 N. 25TH STREET TAMPA FL 33612 DIRECTOR WRIGHT, DORIS

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: BEATRICE A. DALY

VICE PRESIDENT

01/12/2017

Date

Electronic Signature of Signing Officer/Director Detail

Date