

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04485

Entity Name: ALACHUA COUNTY YOUTH FAIR AND LIVESTOCK SHOW ASSOCIATION, INC.**Current Principal Place of Business:**2800 NE 39TH AVENUE
GAINESVILLE, FL 32609**Current Mailing Address:**2800 NE 39TH AVENUE
GAINESVILLE, FL 32609 US**FEI Number: 59-2319316****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SMITH, LORRIE J
11704 NE 4TH AVE
GAINESVILLE, FL 32641 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 PRESIDENT
Name HALE, GUY
Address 15701 NW 278 AVENUE
City-State-Zip: ALACHUA FL 32615

Title SECRETARY
Name CARTER, PAMELA
Address 28226 NW COUNTY RD 241
City-State-Zip: ALACHUA FL 32615

Title OFFICER
Name BEAUFORD, ROLAND
Address 27405 SW 82 PLACE
City-State-Zip: NEWBERRY FL 32669

Title OFFICER
Name ZAMORA, FELIX
Address 14211 NW 154 TERRACE
City-State-Zip: ALACHUA FL 32615

Title T
Name SMITH, LORRIE
Address 11704 NE 4TH AVENUE
City-State-Zip: GAINESVILLE FL 32641

Title VP
Name DOKE, JON
Address 13904 NW 270 AVENUE
City-State-Zip: ALACHUA FL 32615

Title OFFICER
Name SKIPPER, EDDIE
Address 13406 SW 89 AVENUE
City-State-Zip: ARCHER FL 32618

Title OFFICER
Name SAVELL, JESSE
Address 3301 SE 23 TERRACE
City-State-Zip: GAINESVILLE FL 32608

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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: LORRIE J SMITH**TREASURER****03/13/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name HENDERSON, KEVIN
Address PO BOX 1313
City-State-Zip: NEWBERRY FL 32669

Title OFFICER
Name KOON, PERRY
Address 28503 N COUNTY ROAD 1491
City-State-Zip: ALACHUA FL 32615

Title OFFICER
Name HOLSBKE, MATTHEW
Address 133 BAKER'S ACRES DRIVE
City-State-Zip: HAWTHORNE FL 32640

Title OFFICER
Name SWILLEY, JEREMY
Address 28730 NW 32ND AVENUE
City-State-Zip: NEWBERRY FL 32669

Title OFFICER
Name WORLEY, AIMEE
Address PO BOX 354
City-State-Zip: HAWTHORNE FL 32640

Title OFFICER
Name FARR, WAYNE
Address 6802 SE 83RD COURT
City-State-Zip: NEWBERRY FL 32669

Title OFFICER
Name PEARSON, JAMES
Address PO BOX 635
City-State-Zip: HAWTHORNE FL 32640

Title OFFICER
Name SWEAT, RHONDA
Address 17326 SW 75TH AVENUE
City-State-Zip: ARCHER FL 32618

Title OFFICER
Name COONRADT, PASCHA
Address 10516 SW COUNTY RD 346
City-State-Zip: ARCHER FL 32618

Title OFFICER
Name FARR, KIM
Address PO BOX 331
City-State-Zip: NEWBERRY FL 32669

Title OFFICER
Name COLSON, MARK
Address 24109 N STATE RD 121
City-State-Zip: ALACHUA FL 32615

Title OFFICER
Name MIKELL, TOM
Address 15015 NW 89 STREET
City-State-Zip: ALACHUA FL 32615

Title OFFICER
Name PEARSON, JAMES
Address PO BOX 635
City-State-Zip: HAWTHORNE FL 32640

Title OFFICER
Name WILLIS, CHUCK
Address 27007 NORTH STATE ROAD 121
City-State-Zip: ALACHUA FL 32615

Title OFFICER
Name ZAMORA, AMIE
Address 14211 NW 154TH TERRACE
City-State-Zip: ALACHUA FL 32615

Title OFFICER
Name KAUFMAN, JEAN
Address 8729 SW 145TH PLACE
City-State-Zip: ARCHER FL 32618

Title OFFICER
Name QUINTANA, RICKY
Address 3826 SW 1ST AVENUE
City-State-Zip: GAINESVILLE FL 32607

Title OFFICER
Name BLACKWELL, SCOTT
Address PO BOX 923
City-State-Zip: ARCHER FL 32618

Title OFFICER
Name FARR, KEVIN
Address PO BOX 991
City-State-Zip: NEWBERRY FL 32669