

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000001985

**Entity Name:** GATORTOWN GATORS, INC.**Current Principal Place of Business:**11616 NW 69TH TERRACE  
ALACHUA, FL 32615**Current Mailing Address:**156 TURKEY CREEK  
ALACHUA, FL 32615 US**FEI Number:** 59-3105832**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PARRISH, JAMES  
11616 NW 69TH TERRACE  
ALACHUA, FL 32615 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	PD
Name	MCKERCHER, TOM
Address	16642 NW 167TH DRIVE
City-State-Zip:	ALACHUA FL 32615
Title	DIRECTOR
Name	CLARK, PHIL
Address	2621 N.W. 37TH TERRACE
City-State-Zip:	GAINESVILLE FL 32605
Title	DIRECTOR, PRESIDENT ELECT
Name	VANDIVER, FRAN
Address	9715 N.W. 63RD LANE
City-State-Zip:	GAINESVILLE FL 32653

Title	TD
Name	BLOOD, BOB
Address	5125 S.W. 27TH DRIVE
City-State-Zip:	GAINESVILLE FL 32608
Title	TD
Name	PARRISH, JAMES
Address	11616 NW 69TH TERRACE
City-State-Zip:	ALACHUA FL 32615
Title	SECRETARY
Name	BUBY, LINDA
Address	P.O. BOX 13004
City-State-Zip:	GAINESVILLE FL 32604

*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: JAMES PARRISH****TREASURER****04/26/2016**

Electronic Signature of Signing Officer/Director Detail

Date