2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2016
Secretary of State
CC9797394116

DOCUMENT# N93000005095

Entity Name: CIVIC MEDIA CENTER AND LIBRARY, INC.

Current Principal Place of Business:

433 SOUTH MAIN STREET
GAINESVILLE, FL 32601

Current Mailing Address:

433 SOUTH MAIN STREET
GAINESVILLE, FL 32601 US

FEI Number: 59-3208635

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZURHEIDE, CHRIS
4343 NW 21ST DRIVE
GAINESVILLE, FL 32605 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	DBM
Name	COURTER, JOSEPH
Address	1701 NE 75TH ST.
City-State-Zip:	GAINESVILLE FL 32641

Title	BM
Name	STAHMER, PAULA
Address	4621 CLEAR LAKE DR.
City-State-Zip:	GAINESVILLE FL 32607

Title	BM
Name	WALTERS, KATHERINE
Address	709 NW 34 PLACE
City-State-Zip:	GAINESVILLE FL 32609

Title	BM
Name	SUMMERS, NAILAH
Address	712 SW 16TH AVE #104
City-State-Zip:	GAINESVILLE FL 32601

Title	BM
Name	PARKS, SANDRA
Address	71 VALENCIA STREET
City-State-Zip:	ST. AUGUSTINE FL 32084

Title	TBM
Name	ZURHEIDE, CHRIS
Address	4343 NW 21ST DRIVE
City-State-Zip:	GAINESVILLE FL 32605

Title	BM
Name	ARNOLD, SYLVIA
Address	1500 NW 16TH AVE APT 230
City-State-Zip:	GAINESVILLE FL 32605

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: CHRIS ZURHEIDE TBM 04/30/2016

Electronic Signature of Signing Officer/Director Detail — Date