

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008375

FILED
Jan 12, 2010
Secretary of State

Entity Name: GAINESVILLE COUNCIL ON AGING, INC.

Current Principal Place of Business:

1311 SW 16TH ST.
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

1311 SW 16TH ST.
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 65-1075845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DARVILLE, MAXCINE
1311 SW 16TH STREET
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: AKINS, KENNETH
Address: 9840 SW 35TH CT
City-St-Zip: OKEECHOBEE, FL 34974

Title: VPD
Name: JACOBSON, IKE DR
Address: 542 ROOKERY PLACE
City-St-Zip: JUPITER, FL 33458

Title: D
Name: POLLACK, MERLE
Address: 3107 SE 3RD AVENUE
City-St-Zip: OKEECHOBEE, FL 34974

Title: SD
Name: BLEVINS, JOHNNIE
Address: 969 SW 39TH LANE
City-St-Zip: OKEECHOBEE, FL 34974

Title: D
Name: BONNELL, ROSE MARIE
Address: 1006 SW 6TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

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 W ECKLOF, JR

CFO

01/12/2010

Electronic Signature of Signing Officer or Director

_____ Date