### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N14000007431

Entity Name: GAINES FAMILY REUNION, INC.

## **Current Principal Place of Business:**

3705 SW 27TH STREET APT 1024 GAINESVILLE, FL 32608

### **Current Mailing Address:**

3705 SW 27TH STREET APT 1024 GAINESVILLE, FL 32608 US

### FEI Number: 47-2793731

### Name and Address of Current Registered Agent:

GAINES, EDWARD L 3705 SW 27TH STREET APT 1024 GAINESVILLE, FL 32608 US

Certificate of Status Desired: Yes

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 :**

Oncer/Director Detail.				
	Title	PRES	Title	TREASURER
	Name	GAINES, EDWARD L	Name	GAINES, ROLAND
	Address	3705 SW 27TH STREET	Address	3705 SW 27TH STREET APT 1024
	City-State-Zip:	GAINESVILLE FL 32608	City-State-Zip:	
	Title	FINANCIAL SECRETARY	Title	ASSISTANT BUSINESS MANAGER
	Name	GAINES, ROBERT	Name	WILSON, ZANDRA
	Address	3705 SW 27TH STREET APT 1024	Address	3705 SW 27TH STREET APT 1024
	City-State-Zip:	GAINESVILLE FL 32608	City-State-Zip:	
	Title	BUSINESS MANAGER	Title Name	VP
	Name	GAINES, EARLINE		GAINES, ALFONZO
	Address	3705 SW 27TH STREET APT 1024	Address	3705 SW 27TH STREET APT 1024
	City-State-Zip:	GAINESVILLE FL 32608	City-State-Zip:	-
	Title	ASST. SECRETARY		
	Name	RILEY, KIMBERLY		
	Address	3705 SW 27TH STREET APT 1024		
	City-State-Zip:	GAINESVILLE FL 32608		

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.

PRESIDENT

#### SIGNATURE: EDWARD L GAINES

Electronic Signature of Signing Officer/Director Detail

# FILED Feb 09, 2015 Secretary of State CC0796759006

Date