**FILE NOW: FILING FEE IS $61.25**

**NONPROFIT CORPORATION ANNUAL REPORT 1999**

**FLORIDA DEPARTMENT OF STATE**

**Katherine Harris**

Secretary of State

**DIVISION OF CORPORATIONS**

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**DOCUMENT # 701114**

1. Corporation Name

**UNIVERSITY OF TAMPA INCORPORATED**

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2. Principal Place of Business

401 WEST KENNEDY BLVD.

TAMPA FL 33606-1400

US

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2a. Mailing Address

401 WEST KENNEDY BLVD.

TAMPA FL 33606-1400

US

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3. Date Incorporated or Qualified

03/13/1930

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4. FEI Number

59-0624459

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5. Certificate of Status Desired

☐ $8.75 Additional Fee Required

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6. Election Campaign Financing

☐ $5.00 May Be Added to Fees

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7. Name and Address of Current Registered Agent

DAVID C. G. KERR

MACFARLANE, FERGUSON, ALLISON & KELLY

215 MADISON STREET

TAMPA FL 33602

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81 Name

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82 Street Address (P.O. Box Number is Not Acceptable)

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83 City

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84 Zip Code

FL

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85 Zip Code

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11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

---

**SIGNATURE**

Signature typed or printed name of registered agent and title if applicable

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**OFFICERS AND DIRECTORS**

<table>
<thead>
<tr>
<th>TITLE</th>
<th>NAME</th>
<th>STREET ADDRESS</th>
<th>CITY-STATE-ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>PD</td>
<td>VAUGHN, RONALD L.</td>
<td>401 WEST KENNEDY BLVD</td>
<td>TAMPA FL 33606</td>
</tr>
<tr>
<td>VT</td>
<td>FORSCHNER, ROBERT E</td>
<td>401 W. KENNEDY BLVD</td>
<td>TAMPA FL 33606</td>
</tr>
<tr>
<td>S</td>
<td>POPOVICH, DONNA</td>
<td>401 W. KENNEDY BLVD</td>
<td>TAMPA FL 33606</td>
</tr>
<tr>
<td>T</td>
<td>DINGLE, JERRY D.</td>
<td>401 W KENNEDY BLVD</td>
<td>TAMPA FL</td>
</tr>
<tr>
<td>T</td>
<td>OAK, ALAN D</td>
<td>401 WEST KENNEDY BLVD</td>
<td>TAMPA FL</td>
</tr>
<tr>
<td>CT</td>
<td>NAIRN, VINCENT J.</td>
<td>401 WEST KENNEDY BLVD</td>
<td>TAMPA FL 33606</td>
</tr>
</tbody>
</table>

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**SIGNATURE REQUIRED**

Signature and type or print name of signing officer or director

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**DATE**

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**FILED**

Mar 30, 1999 8:00 am

Secretary of State

03-30-1999 90033 038 70.00

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**NOTE:** Registered Agent signature required when registering.

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplement to annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an active certificate of registration, with all other like or previous certificates.