2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# G75479

Entity Name: UNIVERSITY MANAGEMENT, INC.

Current Principal Place of Business:

2811 SW ARCHER RD
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

PO BOX 143086
GAINESVILLE, FL 32614

New Mailing Address:

FEI Number: 59-2353066 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORE, ROXANNE R
1311 NW 98TH TERRACE
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

GORE, ROXANNE R
10 ISHIE AVE.
BRONSON, FL 32621 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: _____ 04/14/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: LEBLANC, VIRGINIA
Address: 10015 SW 48TH PLACE
City-St-Zip: GAINESVILLE, FL 32608

Title: PT ( ) Delete
Name: GORE, ROXANNE R
Address: 1311 NW 98TH TERR.
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PT (X) Change ( ) Addition
Name: GORE, ROXANNE R
Address: 10 ISHIE AVE.
City-St-Zip: BRONSON, FL 32621

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROXANNE GORE P 04/14/2009
Electronic Signature of Signing Officer or Director — Date