2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 04, 2001 8:00 am
Secretary of State
06-04-2001 90005 033 ***150.00

DOCUMENT # N00000003460

C0070868

1. Entity Name
South Campus Owners Association Inc.

Principal Place of Business	Mailing Address
1000 Universal Studios Plaza Orlando, Fl. 32819	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3651430 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Universal City Property Mgmt Co III 1000 Universal Studios Plaza Orlando, Florida 32819	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW !! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	President Peter C. Gracalone 1000 Universal Studios Plaza Orlando, Florida 32819	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	Vice President John R. Sprouls 1000 Universal Studios Plaza Orlando, Florida 32819	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	Vice President + Secretary Marilyn Franck 1000 Universal Studios Plaza Orlando Florida 32819	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	Vice President + Treasurer Michael Corcoran 1000 Universal Studios Plaza Orlando, Florida 32819	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition

CR2E034 (11/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Peter C Gracalone Peter C. Gracalone
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

STF FL32381F.1