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Jan 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34017 (4)
1. Corporation Name: UNIVERSITY COMMONS DEVELOPMENT CORP.



Principal Place of Business: 600 LUCKIE DRIVE, SUITE 424 BIRMINGHAM AL 35223
Mailing Address: 600 LUCKIE DRIVE, SUITE 424 BIRMINGHAM AL 35223-2450

3. Date Incorporated or Qualified: 05/20/1991
3a. Date of Last Report: 04/11/1996
4. FEI Number: NOT APPLICABLE
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent: CORPORATION INFORMATION SERVICES, INC. 1201 HAYES STREET TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent's signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOURON, MICHAEL A	1.2 NAME	
STREET ADDRESS	600 LUCKIE DRIVE, SUITE 424	1.3 STREET ADDRESS	
CITY - ST - ZIP	BIRMINGHAM AL 35223	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, L. JEFF	2.2 NAME	
STREET ADDRESS	600 LUCKIE DRIVE, SUITE 424	2.3 STREET ADDRESS	
CITY - ST - ZIP	BIRMINGHAM AL 35223	2.4 CITY - ST - ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOURON, MARCIA	3.2 NAME	
STREET ADDRESS	600 LUCKIE DRIVE, SUITE 424	3.3 STREET ADDRESS	
CITY - ST - ZIP	BIRMINGHAM AL 35223	3.4 CITY - ST - ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RASPBERRY, JOAN	4.2 NAME	
STREET ADDRESS	600 LUCKIE DRIVE, SUITE 424	4.3 STREET ADDRESS	
CITY - ST - ZIP	BIRMINGHAM AL 35223	4.4 CITY - ST - ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOODSON, JAMES M	5.2 NAME	
STREET ADDRESS	600 LUCKIE DRIVE, SUITE 424	5.3 STREET ADDRESS	
CITY - ST - ZIP	BIRMINGHAM AL 35223	5.4 CITY - ST - ZIP	
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAWTER, JOHN E	6.2 NAME	
STREET ADDRESS	600 LUCKIE DRIVE, SUITE 424	6.3 STREET ADDRESS	
CITY - ST - ZIP	BIRMINGHAM AL 35223	6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Joan C. Raspberry* 15-97 (205) 871-0020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: JOAN C. RASPBERRY Date: Daytime Phone #

CR2E034 (9/96)