


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2008 8:00 am**  
**Secretary of State**

04-18-2008 90054 036 \*\*\*\*61.25

<b>DOCUMENT # N04000005240</b> 1. Entity Name <b>RESIDENTS OF UNIVERSITY VILLAGE EMPLOYEE SCHOLARSHIP FOUNDATION, INC.</b>			
Principal Place of Business 12401 N. 22ND ST. APT. A-701 TAMPA, FL 33612		Mailing Address 12401 N. 22ND ST. APT. A-701 TAMPA, FL 33612	
2. Principal Place of Business - No P.O. Box # <b>12401 N. 22nd St.</b> <b>Apt. G-201</b> <b>Tampa, FL 33612</b> <b>( County) Hillsbruogh</b>		3. Mailing Address <b>12401 N. 22nd St.</b> <b>Apt. G-201</b> <b>Tampa, FL 33612</b> <b>( County) Hillsbruogh</b>	
Zip 	Country 	Zip 	Country 
6. Name and Address of Current Registered Agent  <b>HINES, JAMES P ESQ.</b> <b>315 S. HYDE PARK AVE.</b> <b>TAMPA, FL 33606</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>			
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>Make check payable to Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>VALLOWE, HENRY</b> <input checked="" type="checkbox"/> Delete 12401 N. 22ND ST. - APT. A-701 TAMPA, FL 33612	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Robert Grimes</b> 12401 N. 22nd St Apt. G-201 Tampa, FL 33612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>SMITH, ROGER</b> <input checked="" type="checkbox"/> Delete 12401 N. 22ND ST. TAMPA, FL 33612	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Gerald Patterson</b> 12401 N. 22nd St. Apt D-112 Tampa, FL 33612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>ELDRED, NELSON</b> <input type="checkbox"/> Delete 12401 N. 22ND ST. TAMPA, FL 33612	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Treasurer</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>William H. Jennings</b> 12401 N. 22nd St. Apt C-407 Tampa, FL 33612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
<b>SIGNATURE:</b> <i>Robert Grimes</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>President</b> <small>Date</small> <b>4-16-2008</b> <small>Daytime Phone #</small> <b>813-975-5544</b>	