

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 04, 2011
Secretary of State

Entity Name: THE STATE UNIVERSITY OF IOWA FOUNDATION, INC.

Current Principal Place of Business:

ONE WEST PARK ROAD
IOWA CITY, IA 522444550

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4550
IOWA CITY, IA 522444550

New Mailing Address:

FEI Number: 42-0796760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOUSER, BRADLEY D
C/O AKERMAN SENTERFITT
ONE SOUTHEAST THIRD AVENUE, STE 2800
MIAMI, FL 331311704 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MARSHALL, LYNETTE L
Address: P.O. BOX 4550
City-St-Zip: IOWA CITY, IA 522444550

Title: S
Name: SMITH, JENNIFER K
Address: P.O. BOX 4550
City-St-Zip: IOWA CITY, IA 522444550

Title: VP
Name: SHAW, TIFFANI K
Address: P.O. BOX 4550
City-St-Zip: IOWA CITY, IA 522444550

Title: T
Name: FURMAN, SHERRI P
Address: P.O. BOX 4550
City-St-Zip: IOWA CITY, IA 522444550

Title: VC
Name: VERHILL, ROBERT W
Address: P.O. BOX 4550
City-St-Zip: IOWA CITY, IA 522444550

Title: C
Name: HANSON, THOMAS R
Address: P.O. BOX 4550
City-St-Zip: IOWA CITY, IA 522444550

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER K. SMITH

S

03/04/2011

Electronic Signature of Signing Officer or Director

Date