

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003289

Entity Name: THE UNIVERSITY OF CONNECTICUT FOUNDATION, INC.

Current Principal Place of Business:

2390 ALUMNI DRIVE, U_-3206
STORRS, CT 06269

Current Mailing Address:

2390 ALUMNI DRIVE, U_-3206
STORRS, CT 06269

FEI Number: 06-6070722

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUCK, MARY C
9503 PARKWOOD COURT
FORT MYERS, FL 33908 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PRESIDENT, CEO
Name ROBERTS, SCOTT M
Address 2390 ALUMNI DRIVE, U_-3206
City-State-Zip: STORRS CT 06269

Title TREASURER, DIRECTOR
Name KOPPEL, MICHAEL G
Address 169 E LAKE SAMMAMISH PKWY SE
City-State-Zip: SAMMAMISH WA 98074

Title SECRETARY, DIRECTOR
Name SCHWARTZ, ADAM L
Address 197 SOUTHPOUND ROAD
City-State-Zip: SOUTH GLASTONBURY CT 06073

Title INTERIM SR. VICE PRESIDENT OF
FINANCE AND ADMINISTRATION, CFO
Name MAYNARD, MELISSA A
Address 37 ADELIN PLACE
City-State-Zip: MANSFIELD CENTER CT 06250

Title CHAIRMAN
Name BROWN, MELINDA T
Address 5736 HIGHBOURNE DR
City-State-Zip: NAPLES FL 34113

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: MELISSA A. MAYNARD

**INTERIM SR. VP OF
FINANCE AND
ADMINISTRATION, CFO**

02/25/2021

Electronic Signature of Signing Officer/Director Detail

Date