

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90003 025 ****61.25

DOCUMENT # 700658	
1. Entity Name UNIVERSITY OF FLORIDA ALUMNI ASSOCIATION, INC.	

Principal Place of Business 1938 W. UNIVERSITY AVE GAINESVILLE, FL 32603	Mailing Address PO BOX 14425 GAINESVILLE, FL 32604
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

54063076



07072004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-2199059	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent	
BRAM, LESLIE D 1938 W. UNIVERSITY AVE GAINESVILLE, FL 32603	

7. Name and Address of New Registered Agent	
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. I am familiar with, and accept the obligations of registered agent.

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

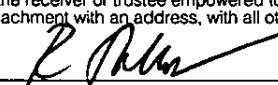
DATE _____

Filing Fee Is \$61.25 Due by September 8, 2004.	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROBELL, PAUL A 1938 W. UNIVERSITY AVE GAINESVILLE, FL 32603 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MOWRY ETTERS, MELANIE 3506 DUNDALK DR TALLAHASSEE, FL 32308 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOWE, DAVID IV 1892 SW OAKWATER PT PALM CITY, FL 349907752 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCDANIEL, R WAYNE 1938 W. UNIVERSITY AVE GAINESVILLE, FL 32603 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, DELPHINE P O BOX 12627 GAINESVILLE, FL 32604 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MICA, DAVID 215 SOUTH MONROE STREET SUITE 800 TALLAHASSEE, FL 32301 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TALBOT, RANDY W. 1938 W. UNIVERSITY AVE GAINESVILLE, FL 32603 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JONASEN, JEFF PO BOX 112 ORLANDO, FL 32802 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STERN, ROBERT PO BOX 1102 TAMPA FL 33601 ☐ Change ☒ Addition

12. 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 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.

SIGNATURE:  **Randy W. Talbot** **7/8/2004** **352-392-1905**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #