

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701114

FILED
May 12, 2008
Secretary of State

Entity Name: THE UNIVERSITY OF TAMPA, INCORPORATED

Current Principal Place of Business:

401 WEST KENNEDY BLVD.
TAMPA, FL 336061490 US

New Principal Place of Business:

Current Mailing Address:

401 WEST KENNEDY BLVD.
TAMPA, FL 336061490 US

New Mailing Address:

FEI Number: 59-0624459 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

VAUGHN, RONALD L
401 WEST KENNEDY BLVD.
TAMPA, FL 336061490 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VAUGHN, RONALD L
Address: 401 WEST KENNEDY BLVD.
City-St-Zip: TAMPA, FL 336061490 US

Title: VT () Delete
Name: FORSCHNER, ROBERT E
Address: 401 W. KENNEDY BLVD.
City-St-Zip: TAMPA, FL 33606

Title: S () Delete
Name: POPOVICH, DONNA
Address: 401 W. KENNEDY BLVD.
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: DUNKEL, MAUREEN R
Address: 401 WEST KENNEDY BLVD.
City-St-Zip: TAMPA, FL 336061490 US

Title: D () Delete
Name: SYKES, JOHN H
Address: 401 WEST KENNEDY BLVD.
City-St-Zip: TAMPA, FL 336061490 US

Title: D () Delete
Name: STRAZ, DAVID A JR
Address: 401 WEST KENNEDY BLVD.
City-St-Zip: TAMPA, FL 336061490 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MCNICHOLS, EUGENE
Address: 401 WEST KENNEDY BLVD.
City-St-Zip: TAMPA, FL 336061490 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT E FORSCHNER

VT

05/12/2008

Electronic Signature of Signing Officer or Director

Date