

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2004 8:00 am
Secretary of State

01-28-2004 90009 034 ****61.25

DOCUMENT # 716489

1. Entity Name
UNIVERSITY VILLAGE APARTMENTS, INC.



Principal Place of Business
**155-B TIGERT HALL
UNIVERSITY OF FLORIDA
GAINESVILLE, FL 32611-2100**

Mailing Address
**P.O. BOX 112100
GAINESVILLE, FL 32611-2100**

34005501



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01082004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
23-7060602

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROLLO, J. MICHAEL DR.
155-B TIGERT HALL
UNIVERSITY OF FLORIDA
GAINESVILLE, FL 32611-2100**

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 **J MICHAEL ROLLO**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **POPELL, JOHN E**
STREET ADDRESS **6125 NW 58TH PLACE**
CITY-ST-ZIP **GAINESVILLE, FL 32653**

TITLE **V** ☒ Delete
NAME **KRUCZEK, JOHN**
STREET ADDRESS **5528 NW 45TH LN**
CITY-ST-ZIP **GAINESVILLE, FL 32606**

TITLE **T** ☐ Delete
NAME **MILLER, ROBERT W**
STREET ADDRESS **2912 NW 25TH TERR.**
CITY-ST-ZIP **GAINESVILLE, FL 32606**

TITLE **SD** ☐ Delete
NAME **DUNKEL, NORBERT W**
STREET ADDRESS **3519 NW 27TH ST**
CITY-ST-ZIP **GAINESVILLE, FL 32605**

TITLE **P** ☐ Delete
NAME **KRATZER, DAVID**
STREET ADDRESS **268 TURKEY CREEK**
CITY-ST-ZIP **ALACHUA, FL 32615**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Change ☒ Addition
NAME **McKee, Michael V**
STREET ADDRESS **3910 NW 67th PL**
CITY-ST-ZIP **Gainesville, FL 32653**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **NORBERT W. DUNKEL**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-04

Date

352-392-2161

Daytime Phone #