716489				
(Requestor's Name) (Address) (Address)	300048817823			
(City/State/Zip/Phone #)	na/24/05 -01/16…011 **a5.00			
Pertified Copies Certificates of Status	D5 APR -8			
Office Use Only	4/11/05 RAIRO Ches'			

L

I.



Division of Student Affairs Housing and Residence Education PO Box 112100 Gainesville, FL 32611-2100 (352) 392-2161 Fax: (352) 392-6819 houinfo@housing.ufl.edu

March 22, 2005

Amendment Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find the Cover Letter, Statement of Change of Registered Office or Registered Agent or Both for Corporations and a check in the amount of \$35.00. Please note I do not have a Document Number for this change, I hope this number will be assigned by your office. If not, please contact me with the appropriate information to obtain a Document Number.

Should you require additional information, please do not hesitate to contact me. Thank you for your assistance in effecting this change.

Sincerely,

terrer Cares

Denise Tanner Associate Director Housing Business Services



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 31, 2005

UNIVERSITY OF FLORIDA DENISE TANNER PO BOX 112100 GAINES, FL 32611-2100

SUBJECT: UNIVERSITY VILLAGE APARTMENTS, INC. Ref. Number: 716489

We have received your document for UNIVERSITY VILLAGE APARTMENTS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Document Specialist

Letter Number: 605A00021719

Attached _ orrection 0-

RECEIVED 05 HPR-7 PH 1:02

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: UNIVERSITY VILLAGE APARTMENTS, INC.

(Name of corporation)

DOCUMENT NUMBER:

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DENISE TANNER

(Name of contact person)

University of Florida-Department of Housing & Residence Education (Firm/Company)

P. O. BOX 112100

(Address)

Gainesville, FL . 32611-2100

(City/state and zip code)

For further information concerning this matter, please call:

 DENISE TANNER
 at (352) 392-2171 ext 10176

 (Name of contact person)
 (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

CR2E045(6/04)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of the corporation: UNIVERSITY VILLAGE APARTMENTS, INC.

2. The principal office address: P. O. Box 112100., Gainesville, FL 32611-2100

3. The mailing address (if different):_

4. Date of incorporation/qualification: 4/24/69 _____ Document number:

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

	Dr, J. Michael Rollo	T's	05	
	155-B Tigert Hall, University of Florida	LAF	APR	11
	Gainesville, FL 32611	ASS	2	5
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	DE FLOR	PH 1:3	مرور بر المراجع مرور بر المراجع مرور بر المراجع
	David Bowles		R CO	t
	200 Student Recreation & Fitness Center, University	of Flo	orida	

(P.O. Box NOT acceptable)

Gainesville, FL 32611-8212

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

icer or director

NORBERT DUNKEL, SECRETARY

(Date)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been polified in writing of this change.

(Signature of Registered Agent)

If signing on behalf of an entity:

DAVID BOWLES

(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314