

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED  
Oct 09, 2006  
Secretary of State

DOCUMENT# 858212

Entity Name: ANDERSON UNIVERSITY, INC.

**Current Principal Place of Business:**

1100 E. 5TH STREET  
ANDERSON, IN 460123462

**New Principal Place of Business:**

**Current Mailing Address:**

1100 E. 5TH STREET  
ANDERSON, IN 460123462

**New Mailing Address:**

FEI Number: 35-0867954      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CREWS, MICHAEL W.  
130 E. CENTRAL AVENUE  
LAKE WALES, FL      US

**Name and Address of New Registered Agent:**

CREWS, MICHAEL W.  
130 E. CENTRAL AVENUE  
LAKE WALES, FL      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: MICHAEL CREWS

10/09/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: CARROLL, DENNIS D  
Address: 2910 ALEXANDRIA PIKE  
City-St-Zip: ANDERSON, IN 46012

Title: D      ( ) Delete  
Name: SETTLEMEYER, LOIS A  
Address: 1536 EAST PINE RIVER ROAD  
City-St-Zip: MIDLAND, MI

Title: D      ( ) Delete  
Name: NICHOLSON, PAUL M  
Address: 2730 EAST 100 NORTH  
City-St-Zip: ANDERSON, IN 46012

Title: V      ( ) Delete  
Name: CALDWELL, CARL H.  
Address: 2206 MELODY LANE  
City-St-Zip: ANDERSON, IN 46012

Title: VT      (X) Delete  
Name: LANDEY, SENA K.,  
Address: 929 MYERS STREET  
City-St-Zip: ANDERSON, IN

Title: VS      (X) Delete  
Name: COLLETTE, MICHAEL E  
Address: 2329 CEDAR BEND DR  
City-St-Zip: ANDERSON, IN 46011

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: EDWARDS, JAMES  
Address: 1240 UNIVERSITY BLVD  
City-St-Zip: ANDERSON, IN 46012

Title: V      (X) Change ( ) Addition  
Name: CALDWELL, CARL H  
Address: 2206 MELODY LANE  
City-St-Zip: ANDERSON, IN 46012

Title: T      (X) Change ( ) Addition  
Name: LANDEY, SENA K  
Address: 929 MYERS STREET  
City-St-Zip: ANDERSON, IN 46012

Title: S      (X) Change ( ) Addition  
Name: COLLETTE, MICHAEL E  
Address: 239 CEDAR BEND DR.  
City-St-Zip: ANDERSON, IN 46011

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SENA LANDEY

T

10/09/2006

Electronic Signature of Signing Officer or Director

Date