2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 22, 2004
Secretary of State

DOCUMENT# F03000001038

Entity Name: AUBURN UNIVERSITY FOUNDATION, INC.

Current Principal Place of Business:

317 SO. COLLEGE ST.
AUBURN, AL 36849

New Principal Place of Business:

Current Mailing Address:

317 SO. COLLEGE ST.
AUBURN, AL 36849

New Mailing Address:

FEI Number: 63-6022422 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: D ( ) Delete
Name: BLACKBURN, J. GILMER
Address: P.O. BOX 1469
City-St-Zip: DECATUR, AL 356021469

Title: D ( ) Delete
Name: CARTER, CLAUDE I
Address: P.O. BOX 2010
City-St-Zip: DAPHNE, AL 365264006

Title: D ( ) Delete
Name: CASSADY, JAMES DANIEL
Address: 4001 CARMICHAEL RD., STE. 500
City-St-Zip: MONTGOMERY, AL 36106

Title: D ( ) Delete
Name: COUSINS, ANN DRAUGHON
Address: 3920 BROOKHAVEN DR., NE
City-St-Zip: ATLANTA, GA 303082265

Title: D ( ) Delete
Name: DEMENT, BETTY M
Address: 317 S COLLEGE ST
City-St-Zip: AUBURN, AL 36849

Title: D ( ) Delete
Name: DENSON, JOHN V
Address: P.O. BOX 2345, 709 AVENUE A
City-St-Zip: OPELIKA, AL 36801

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: ( ) 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 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 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: D.R. MCGINNIS DR. 10/22/2004

Electronic Signature of Signing Officer or Director — Date