2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2006
Secretary of State

DOCUMENT# F03000005312

Entity Name: THE UNIVERSITY OF ARKANSAS FOUNDATION, INC.

Current Principal Place of Business:

700 REASEARCH CENTER BLVD.
MS-7
FAYETTEVILLE,, AR 72701

New Principal Place of Business:

Current Mailing Address:

700 REASEARCH CENTER BLVD.
MS-7
FAYETTEVILLE,, AR 72701

New Mailing Address:

FEI Number: 71-6056774 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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:	MR	( ) Delete
Name:	MOORE, JERRY	
Address:	700 RESEARCH CTR BLVD MS-7	
City-St-Zip:	FAYETTEVILLE, AR 72701	
Title:	MRS	( ) Delete
Name:	LEE, DIANNA	
Address:	700 RESEARCH CTR BLVD MS-7	
City-St-Zip:	FAYETTEVILLE, AR 72701	
Title:	MR	( ) Delete
Name:	OLDHAM, FRANK W	
Address:	AMERICAN STATE BANK, 2201 FAIRPARK	
City-St-Zip:	JONESBORO, AR 72401	
Title:	MR	( ) Delete
Name:	EPLEY, LEWIS E JR	
Address:	2805 BRANDON CIR.	
City-St-Zip:	FAYETTEVILLE,, AR 72703	
Title:	MR	( ) Delete
Name:	HARRISON, FRED	
Address:	212 CENTER STREET	
City-St-Zip:	LITTLE ROCK, AR 72201	
Title:	MR	( ) Delete
Name:	BLACK, FREDDIE	
Address:	425 STUART ISLAND DR	
City-St-Zip:	LAKE VILLAGE, AR 71653	

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 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: DIANNA LEE MRS. 01/11/2006

Electronic Signature of Signing Officer or Director — Date