2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# F95000006079

Entity Name: INDIANA UNIVERSITY FOUNDATION INCORPORATED

Current Principal Place of Business:

SHOWALTER HOUSE, STATE HWY 46 BYPASS
BLOOMINGTON, IN 47402

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 500
BLOOMINGTON, IN 47402 US

New Mailing Address:

FEI Number: 35-6018940 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHRECK, THOMAS C
DEVCON, INC.
9050 LAS MADERAS DRIVE, #202
BONITA SPRINGS, FL 34135 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: DC ( ) Delete
Name: MCROBBIE, MICHAEL
Address: SHOWALTER HOUSE, STATE HWY 46 BYPASS
City-St-Zip: BLOOMINGTON, IN 47402

Title: DTR ( ) Delete
Name: CARMICHAEL, WILLIAM P
Address: SHOWALTER HOUSE, STATE HWY 46 BYPASS
City-St-Zip: BLOOMINGTON, IN 47402

Title: D ( ) Delete
Name: COOK, GAYLE K
Address: SHOWALTER HOUSE, STATE HWY 46 BYPASS
City-St-Zip: BLOOMINGTON, IN 47402

Title: VD ( ) Delete
Name: DOVE, KENT E
Address: SHOWALTER HOUSE, STATE HWY 46 BYPASS
City-St-Zip: BLOOMINGTON, IN 47402

Title: CIO ( ) Delete
Name: STRATTEN, GARY A
Address: SHOWALTER HOUSE, STATE HWY 46 BYPASS
City-St-Zip: BLOOMINGTON, IN 47402

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DTR (X) Change ( ) Addition
Name: WOOSNAM, RICHARD E
Address: SHOWALTER HOUSE, STATE HWY 46 BYPASS
City-St-Zip: BLOOMINGTON, IN 47402

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

Title: CEO (X) Change ( ) Addition
Name: TEMPLE, EUGENE R
Address: SHOWALTER HOUSE, STATE HWY 46 BYPASS
City-St-Zip: BLOOMINGTON, IN 47402

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

Title: AVP ( ) Change (X) Addition
Name: REEL, GINA M
Address: SHOWALTER HOUSE, STATE HWY 46 BYPASS
City-St-Zip: BLOOMINGTON, IN 47402

I hereby certify that the information supplied with this filing does not qualify 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: GINA M. REEL AVP 04/29/2009

Electronic Signature of Signing Officer or Director — Date