2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008351

FILED Jul 24, 2006 Secretary of State

Entity Name: THE COUNCIL OF UNIVERSITY NEIGHBORHOOD ASSOCIATIONS, INC.

urrent P	Principal Place of Business:	New Principal Place of Business:
05 SW 42 BAINESVI	2 ST ILLE, FL 32607 US	402 NW 24TH ST GAINESVILLE, FL 32607 US
urrent N	failing Address:	New Mailing Address:
05 SW 42 SAINESVI	2 ST ILLE, FL 32607 US	402 NW 24TH ST GAINESVILLE, FL 32607 US
El Number accordan	r: 52-2301307 FEI Number Applied For() Face with s. 607.193(2)(b), F.S., the corporation did not re	FEI Number Not Applicable () Certificate of Status Desired () eceive the prior notice.
ame and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
VRIGHT, 05 SW 42 GAINESVI		HARNSBERGER, JAMES 402 NW 24TH ST GAINESVILLE, FL 32607 US
	named antity submits this statement for the nurn	
	e named entity submits this statement for the purp e of Florida.	cose of changing its registered office or registered agent, or both,
the State		07/24/2006
the State	e of Florida.	
the State	e of Florida. RE: JAMES HARNSBERGER	07/24/2006
the State	RE: JAMES HARNSBERGER Electronic Signature of Registered Agent	07/24/2006 Date
the State GNATUI FFICER cle: ame: ldress:	re of Florida. RE: JAMES HARNSBERGER Electronic Signature of Registered Agent S AND DIRECTORS: D () Delete HURTAK, DIANE 1729 NW 8TH AVENUE	O7/24/2006 Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address:
the State GNATUI FFICER le: ime: dress: ty-St-Zip: le: ime: dress:	re of Florida. RE: JAMES HARNSBERGER Electronic Signature of Registered Agent S AND DIRECTORS: D () Delete HURTAK, DIANE 1729 NW 8TH AVENUE GAINESVILLE, FL 32603 D () Delete REISKIND, JONATHAN 213 SW 41 ST	Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: JAMES HARNSBERGER D 07/24/2006