2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000008351

FILED Sep 09, 2003 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

2737 SW 4TH PLACE 105 SW 42 ST

GAINESVILLE, FL 326073111 GAINESVILLE, FL 32607 US

Current Mailing Address: New Mailing Address:

2737 SW 4TH PLACE 105 SW 42 ST

GAINESVILLE, FL 326073111 GAINESVILLE, FL 32607 US

FEI Number: 52-2301307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SASNETT-STAUFFER, GAIL WRIGHT, SUSAN 2737 SW 4TH PLACE 105 SW 42 ST

GAINESVILLE, FL 326073111 US GAINESVILLE, FL 32607 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: SUSAN WRIGHT 09/09/2003

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

 Name:
 MALAGODI, MARJORIE
 Name:
 WELCH, DAVID

 Address:
 3015 SW FIRST AVE
 Address:
 228 NW 28 ST

City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete Title: D (X) Change () Addition

Name: SASNETT-STAUFFER, GAIL Name: REISKIND, JONATHAN Address: 2737 SW 4TH PLACE Address: 213 SW 41 ST

City-St-Zip: GAINESVILLE, FL 326073111 City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete Title: () Change () Addition

 Name:
 WRIGHT, SUSAN
 Name:

 Address:
 105 SW 42 ST
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32607276
 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: SUSAN WRIGHT D 09/09/2003