## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000004819

Entity Name: HODGES UNIVERSITY FOUNDATION, INC.

FILED Oct 08, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
2655 NOR <sup>*</sup> NAPLES, F	THBROOKE DR 'L 34119		
Current Mailing Address:		New Mailing Address:	
2655 NOR <sup>*</sup> NAPLES, F	THBROOKE DR IL 34119		
	65-1176468 FEI Number Applied For() FEI Number Applied For() FEI Number Applied For() FEI Number With s. 607.193(2)(b), F.S., the corporation did not receive Address of Current Registered Agent:		
	I, TERRY P IHBROOKE DR IL 34119 US		
The above in the State	named entity submits this statement for the purpose of Florida.	of changing it	ts registered office or registered agent, or both,
SIGNATURE: TERRY P. MCMAHAN			
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CD () Delete MCMAHAN, TERRY P 2655 NORTHBROOKE DR NAPLES, FL 34119	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MCMAHAN, TERRY P 2655 NORTHBROOKE DR NAPLES, FL 34119
Title: Name: Address: City-St-Zip:	D () Delete TRAINA, LOUIS 2655 NORTHBROOKE DR NAPLES, FL 34119	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete WHITE, JOHN W 2655 NORTHBROOKE DR NAPLES, FL 34119	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD () Delete BROCK, RANDY 2655 NORTHBROOKE DR NAPLES, FL 34119	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete HODGES, EARL 2655 NORTHBROOKE DR NAPLES, FL 34119	Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition BURRIS, BARBARAD 2655 NORTHBROOKE DR NAPLES, FL 34119
Title: Name: Address: City-St-Zip:	SD () Delete LONDON, MICHAEL 2655 NORTHBROOKE DR NAPLES, FL 34119	Title: Name: Address: City-St-Zip:	CD (X) Change ( ) Addition LONDON, MICHAEL 2655 NORTHBROOKE DR NAPLES, FL 34119

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: JOHN W. WHITE D 10/08/2009