2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# N05000008129

Entity Name: UCF CONVOCATION CORPORATION

Current Principal Place of Business:

4000 CENTRAL FLORIDA BLVD. ROOM 384
MILLICAN HALL
ORLANDO, FL 32816

New Principal Place of Business:

Current Mailing Address:

4000 CENTRAL FLORIDA BLVD. ROOM 384
MILLICAN HALL
ORLANDO, FL 32816

New Mailing Address:

FEI Number: 16-1733312 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLE, W.SCOTT
4000 CENTRAL FLORIDA BLVD. ROOM 384
MILLICAN HALL
ORLANDO, FL 32816 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:	C	( ) Delete
Name:	HOLMES, ROBERT J MR.	
Address:	12424 RESEARCH PKWY, STE 250	
City-St-Zip:	ORLANDO, FL 32826	
Title:	P	( ) Delete
Name:	EHASZ, MARIBETH DR	
Address:	4000 CENTRAL FLORIDA BLVD, MH 282	
City-St-Zip:	ORLANDO, FL 32816	
Title:	S/T	( ) Delete
Name:	MERCK LL, WILLIAM F MR.	
Address:	PO BOX 160020	
City-St-Zip:	ORLANDO, FL 32816	
Title:	D	(X) Delete
Name:	BARNES, BETH DR	
Address:	PO BOX 160002	
City-St-Zip:	ORLANDO, FL 32816	

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:	

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: WILLIAM MERCK S/T 03/02/2009

Electronic Signature of Signing Officer or Director — Date