

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010055

FILED  
Feb 08, 2007  
Secretary of State

**Entity Name:** UNIVERSITY FOUNDATION FOR EDUCATION AND RESEARCH, INC.

**Current Principal Place of Business:**

2 COLUMBIA DR  
STE. A327  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

2 COLUMBIA DR  
STE. A327  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:** 20-5973618

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANGAR, DEVANAND  
2 COLUMBIA DR  
STE. A327  
TAMPA, FL 33606 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: OFC ( ) Change (X) Addition  
Name: MANGAR, DEVANAND  
Address: 2 COLUMBIA DR  
City-St-Zip: TAMPA, FL 33606

Title: OFC ( ) Change (X) Addition  
Name: ANAND, AMRAT  
Address: 2 COLUMBIA DR  
City-St-Zip: TAMPA, FL 33606

Title: OFC ( ) Change (X) Addition  
Name: QUARTUCCIO, WILLIAM  
Address: 2 COLUMBIA DR  
City-St-Zip: TAMPA, FL 33606

Title: OFC ( ) Change (X) Addition  
Name: NAVORI, EMERY  
Address: 2 COLUMBIA DR  
City-St-Zip: TAMPA, FL 33606

Title: OFC ( ) Change (X) Addition  
Name: MASSEY, VERONICA  
Address: 2 COLUMBIA DR  
City-St-Zip: TAMPA, FL 33606

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: DEVANAND MANGAR, MD

OFC

02/08/2007

Electronic Signature of Signing Officer or Director

Date