2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2001 08:00 AM
Secretary of State

DOCUMENT # **N37488**

1. Entity Name
UNIVERSITY OF CENTRAL FLORIDA RETIREMENT ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% DEPT OF PERSONNEL SERVICES UNIVERSITY OF CENTRAL FLORIDA ORLANDO FL 32816	% DEPT OF PERSONNEL SERVICES UNIVERSITY OF CENTRAL FLORIDA ORLANDO FL 32816

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number **59-2975471** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JENKINS DAVID R 327 FITZHUGH ROD WINTER PARK FL 32793 US	Name JENKINS DAVID R Street Address (P.O. Box Number is Not Acceptable) 327 FITZHUGH ROAD City WINTER PARK **FL** Zip Code 32793

8. 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 _____ **05/09/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GOREE JOHN P. P.O. BOX 620146 OVIEDO FL	☐ Delete	D ENGERT BARTH 425 GILBERT ROAD WINTER PARK FL 327924826	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAUM BILL 9242 EVERWOOD ST ORLANDO FL 32825	☐ Delete	D DUTTON ARTHUR 9953 LAKE GEORGIA DR ORLANDO FL 328173120	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MATTSON GUY C 2600 SAGINAN TRAL MAITLAND FL 32751	☐ Delete	VD MANNING PATRICIA 2975 LA CITA LANE TITUSVILLE FL 32870	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JENKINS DAVID P.O. BOX 4065 WINTER PARK FL	☐ Delete	TD JENKINS DAVID P.O. BOX 4065 WINTER PARK FL 327934065	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD POPE BARBARA W 2150 S TANNER ROAD ORLANDO FL 328201033	☐ Delete	DP POPE BARBARA W 2150 S TANNER ROAD ORLANDO FL 328201033	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CIROCCO SONIA M 2104 PEBBLE BEACH BLVD ORLANDO FL 32826	☐ Delete	SD HOSTETLER BILL 1500 MIAMI ROAD ORLANDO FL 328256507	☒ Change	☐ Addition

CR2E037 (11/00)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David R. Jenkins TD 05/09/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #