

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90226 040 ****61.25

DOCUMENT # N95000005810

1. Entity Name
**RESEARCH FOUNDATION OF THE UNIVERSITY OF
WEST FLORIDA, INCORPORATED**



Principal Place of Business
**11000 UNIVERSITY PKWY
BLDG 10 ROOM 118
PENSACOLA, FL 32514 US**

Mailing Address
**11000 UNIVERSITY PKWY
BLDG #10 ROOM #118
PENSACOLA, FL 32514 US**

94074261



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04272004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-3367392

Applied For
Not Applicable

Zip

Country

Zip

Country

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

DELULIO, REGINA correct spelling is DeJulio - not
11000 UNIVERSITY PKWY DeL - it is "I" as in Insert.
BLDG 10, RM 122
PENSACOLA, FL 32514

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Regina DeJulio

Regina DeJulio

4/29/04

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Delete
NAME **DIMSDALE, PARKS**
STREET ADDRESS **3441 WESLEYAN CT**
CITY-ST-ZIP **PACE, FL 32571**

TITLE **P** ☐ Change ☒ Addition
NAME **Little, Wesley**
STREET ADDRESS **11,000 University Pkwy. Bldg. 10, Rm 210**
CITY-ST-ZIP **Pensacola, FL 32514**

TITLE **D** ☐ Delete
NAME **CAVANAUGH, JOHN**
STREET ADDRESS **3338 CHANTERENE DR**
CITY-ST-ZIP **PENSACOLA, FL 32507**

TITLE **D** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **HANSEN, JACK**
STREET ADDRESS **14 PORT ROYALWAY**
CITY-ST-ZIP **PENSACOLA, FL 32501**

TITLE **D** ☐ Change ☒ Addition
NAME **Wooten, Cornelius**
STREET ADDRESS **11,000 University Pkwy. Bldg. 10, Rm 238**
CITY-ST-ZIP **Pensacola, FL 32514**

TITLE **D** ☒ Delete
NAME **HARPER, RICHARD K**
STREET ADDRESS **815 BAYSHORE #206**
CITY-ST-ZIP **PENSACOLA, FL 32507**

TITLE **D** ☐ Change ☒ Addition
NAME **Vanderheyden, Sandra**
STREET ADDRESS **11,000 University Pkwy. Bldg. 11, Rm 101**
CITY-ST-ZIP **Pensacola, FL 32514**

TITLE **D** ☒ Delete
NAME **HENNING, GRANT**
STREET ADDRESS **3908 TRONBRIDGE CIR**
CITY-ST-ZIP **PENSACOLA, FL 32514**

TITLE **D** ☐ Change ☒ Addition
NAME **Bense, Judy**
STREET ADDRESS **11,000 University Pkwy. Bldg. 89, Rm 8**
CITY-ST-ZIP **Pensacola, FL 32514**

TITLE **D** ☒ Delete
NAME **PHILLIPS, EDDIE**
STREET ADDRESS **2572 PALM SHORES**
CITY-ST-ZIP **SHALIMAR, FL 32579**

TITLE **D** ☐ Change ☒ Addition
NAME **Rao, Ranga**
STREET ADDRESS **11,000 University Pkwy. Bldg. 58, Rm 70**
CITY-ST-ZIP **Pensacola, FL 32514**

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:

John C. Cavanaugh **JOHN C. CAVANAUGH**

Date

Daytime Phone #

John Cavanaugh, Director