2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
05-06-2002 90165 040 ****61.25

DOCUMENT # N98000007061

1. Entity Name

OAK HAMMOCK AT THE UNIVERSITY OF FLORIDA, INC.

Principal Place of Business	Mailing Address
4817 S.W. 34TH STREET GAINESVILLE FL 32608	4817 S.W. 34TH STREET GAINESVILLE FL 32608

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 59-3562098 ☐ 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
COLE, W. SCOTT 123 TIGERT HALL, UNIVERSITY OF FLORIDA GAINESVILLE FL 32611	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.

SIGNATURE _____
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 REMBERT, DAVIS M JR. 13807 N.W. 50TH AVENUE GAINESVILLE FL 32606	☐ Delete	D Paula Delaney 75 SW 23RD Way Gainesville FL 32607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BRAM, LESLIE D 2012 W. UNIVERSITY AVENUE GAINESVILLE FL 32603	☐ Delete	D Dr. Richard A. Gutekunst 3942 NW 25th Circle Gainesville FL 32606-7435	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD FRANK, ROBERT G DEAN 1600 S.W. ARCHER RD., RM N1-2 GAINESVILLE FL 32610	☐ Delete	D Samuel N. Holloway Sr. 1405 NW 13th Street Gainesville FL 32601	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ASH, CAROL R N10123 HILLS MILLER HEALTH CENTER GAINESVILLE FL 32610	☐ Delete	D Ash, Carol R N1012 J Hillis Miller Health Center Gainesville FL 32610	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRYAN, ROBERT A 2012 W. UNIVERSITY AVENUE GAINESVILLE FL 32603	☐ Delete	D Robert A. Levitt Ph.D. 10318 S.W. 22ND Avenue Gainesville FL 32607-3268	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRISER, PAULA 4588 SWILOAN BRIDGE LANE NORTH JACKSONVILLE FL 32224-5617	☐ Delete	D criser, Paula 4588 Swilcan Bridge Lane North Jacksonville FL 32224-5617	☒ Change ☐ Addition

SIGN HERE

CR2E037 (9/01)

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: SIGNATURE REQUIRED Exec. V.P. 4/22/02 3523925499
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

2002 Uniform Business Report (UBR) **Document #N98000007061**

Oak Hammock at the University of Florida, Inc. **FEI #59-3562098**

Box 11 – Additional Page

D
Dr. Jeffrey W. Dwyer
1329 Building – Room 5234
P O Box 10017
Gainesville FL 32610-0177

D
Gerald Schaffer
8801 SW-45th-Blvd
Gainesville FL 32608-4138

D
Dr. E. T. York
Building 106, Mowry Road
Box 110850
Gainesville FL 32611

D
Dean Kathleen A. Long
1600 SW Archer Road
Room1-N1-17
Gainesville FL 32610