#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 731494** 

Entity Name: THE UNIVERSITY ATHLETIC ASSOCIATION, INC.

FILED
Jan 08, 2024
Secretary of State
7115761779CC

## **Current Principal Place of Business:**

121 GALE LEMERAND DR. BEN HILL GRIFFIN STADIUM GAINESVILLE, FL 32611

## **Current Mailing Address:**

P.O. BOX 14485 UNIVERSITY ATHLETIC ASSOCIATION GAINESVILLE, FL 32604 US

FEI Number: 59-6002050 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

STUCKEY, MELISSA 121 GALE LEMERAND DR. BEN HILL GRIFFIN STADIUM GAINESVILLE, FL 32611 US

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: MELISSA STUCKEY 01/08/2024

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title	CEO (NON-VOTING	G) T	Γitle \	/P

NameSTRICKLIN, SCOTTNameMERKEL, JOELENAddressP.O. BOX 14485AddressPO BOX 14485

City-State-Zip: GAINESVILLE FL 32604 City-State-Zip: GAINESVILLE FL 32604

TitleBOARD MEMBERTitleBOARD MEMBERNameSASSE, BENNameANGLE, SCOTTAddressP.O. BOX 113150<br/>226 TIGERT HALLAddressP.O. BOX 113175<br/>235 TIGERT HALL

City-State-Zip: GAINESVILLE FL 32611 City-State-Zip: GAINESVILLE FL 32611

Title BOARD MEMBER

Name GREEN, OLIVIA

Address 305 J WAYNE REITZ UNION

City-State-Zip: GAINESVILLE FL 32611

Title BOARD MEMBER

KRATZER, DAVE

Address P.O. BOX 113175
235 TIGERT HALL

City-State-Zip: GAINESVILLE FL 32611

Title PRESIDENT Title BOARD MEMBER (NON-VOTING)

 Name
 CORR, CHRIS
 Name
 TEALER, LYNDA

 Address
 PO BOX 14485
 Address
 P.O. BOX 14485

City-State-Zip: GAINESVILLE FL 32604 City-State-Zip: GAINESVILLE FL 32604

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SIGNATURE: MELISSA STUCKEY CFO

I hereby 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 all other like empowered.

### Officer/Director Detail Continued:

Title BOARD MEMBER
Name CLARK, CHLOI
Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title BOARD MEMBER

Name BUCKNER, ROBERT

Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title CFO - NON-VOTING
Name STUCKEY, MELISSA

Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title BOARD MEMBER

Name HEAVENER, BILL

Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title BOARD MEMBER
Name BARTON, KIM
Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title SECRETARY
Name JANELLE, CHRIS

Address FLG 132E

City-State-Zip: GAINESVILLE FL 32611

Title BOARD MEMBER
Name TAYLOR, CURTIS
Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title TREASURER

Name DAVIDSON, DOUG

Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title BOARD MEMBER
Name BEACH, BRIAN
Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title BOARD MEMBER
Name LEVINE, BRIAN
Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title BOARD MEMBER
Name OBERNDORF, LOU
Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title BOARD MEMBER
Name COWANS, ALVIN

Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604

Title BOARD MEMBER
Name ROLLE, KATRINA

Address PO BOX 14485

City-State-Zip: GAINESVILLE FL 32604