2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2017
Secretary of State
CC6223732992

DOCUMENT# F10000000237

Entity Name: AUBURN UNIVERSITY REAL ESTATE FOUNDATION, INC.

Current Principal Place of Business:

317 SOUTH COLLEGE STREET
AUBURN, AL 36849

Current Mailing Address:

317 SOUTH COLLEGE STREET
AUBURN, AL 36849

FEI Number: 56-2535892

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	ADVISOR
Name	DAVIS, NANCY
Address	324 EAST MAGNOLIA DRIVE
City-State-Zip:	AUBURN AL 36830

Title	VICE CHAIR & TREASURER
Name	BLAIR, DOTTIE K.
Address	9161 CASTLE PINES CIRCLE
City-State-Zip:	MONTGOMERY AL 36117

Title	LEGAL COUNSEL
Name	ESTESS, GLENN E. JR.
Address	WALLACE, JORDAN, RATLIFF & BRANDT LLC 800 SHADES CREEK PARKWAY SUITE 400
City-State-Zip:	BIRMINGHAM AL 35209

Title	LIAISON
Name	STEPHENS, ANGIE B.
Address	317 SOUTH COLLEGE STREET
City-State-Zip:	AUBURN AL 36849

Title	PRESIDENT
Name	PARKER, JANE D.
Address	317 SOUTH COLLEGE STREET
City-State-Zip:	AUBURN AL 36849

Title	CHAIR
Name	MILTON, EDWARD N.
Address	3280 PEACHTREE ROAD NORTHEAST SUITE 1400
City-State-Zip:	ATLANTA GA 30305

Title	SECRETARY
Name	SPEROW, WANDA M.
Address	317 SOUTH COLLEGE STREET
City-State-Zip:	AUBURN AL 36849

Title	LIAISON COORDINATOR
Name	STIRLING, ROBIN
Address	317 SOUTH COLLEGE STREET
City-State-Zip:	AUBURN AL 36849

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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.

SIGNATURE: JANE DIFOLCO PARKER PRESIDENT 01/09/2017

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WOLTOSZ, WALTER S.
Address	SIMULATIONS PLUS, INC. 42505 10TH STREET WEST
City-State-Zip:	LANCASTER CA 93534

Title	BOARD MEMBER
Name	SPENCER, STEVEN
Address	1749 VESTWOOD HILLS DRIVE
City-State-Zip:	BIRMINGHAM AL 35216

Title	BOARD MEMBER
Name	JERNIGAN, JOHN A DR.
Address	1301 MULBERRY STREET
City-State-Zip:	MONTGOMERY AL 36106