

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00765

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** UNIVERSITY OF ST. FRANCIS CORPORATION

**Current Principal Place of Business:**

500 N. WILCOX STREET  
JOLIET, IL 60435

**New Principal Place of Business:**

**Current Mailing Address:**

500 N. WILCOX STREET  
JOLIET, IL 60435

**New Mailing Address:**

**FEI Number:** 36-2170999

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCCOY, JANICE  
3330 SPARTINA AVE.  
MERRITT ISLAND, FL 32953 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WEBB, J. BRADLEY  
Address: 500 N. WILCOX STREET  
City-St-Zip: JOLIET, IL 60435

Title: D  
Name: BASS, MARK D  
Address: 500 N. WILCOX STREET  
City-St-Zip: JOLIET, IL 60435

Title: S  
Name: VINCIGUERRA, MICHAEL J  
Address: 500 N. WILCOX STREET  
City-St-Zip: JOLIET, IL 60435

Title: T  
Name: TENUTA, ROBERT  
Address: 500 N. WILCOX STREET  
City-St-Zip: JOLIET, IL

Title: D  
Name: MANNER, JOHN  
Address: 500 N. WILCOX STREET  
City-St-Zip: JOLIET, IL

Title: D  
Name: BARON, ROBERT J  
Address: 500 N. WILCOX STREET  
City-St-Zip: JOLIET, IL 60435

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: MICHAEL J. VINCIGUERRA

SECR

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date