2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708865

FILED Mar 08, 2011 Secretary of State

Entity Name: SAINT LEO UNIVERSITY INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

SAINT LEO, FL 33574

Current Mailing Address: New Mailing Address:

PO BOX 6665 MC 2246

ST. LEO, FL 33574

FEI Number: 59-1237047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

KIRK, DR ARTHUR F KIRK, DR ARTHUR F

33701 HWY 52 33701 SR 52

SAINT LEO, FL 33574 MC2187 US

SAINT LEO, FL 33574 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: 03/08/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

TAPIA, DONALD Name:

Address: 4805 E ROADRUNNDER ROAD City-St-Zip: PARADISE VALLEY, AZ 85253

Title: MR.

Name: GERBINO, ANTHONY J

Address: 2700 THREE ALLEN CENTER, 333 CLAY STREET

City-St-Zip: HOUSTON, TX 77002

Title: MS.

THOMPSON, PAT Name: Address: 5028 BURWELL ROAD City-St-Zip: WEBSTER, FL 33597

Title: MR.

Name: POWERS, PETER 2824 RUMSON COURT Address: City-St-Zip: ATLANTA, GA 30305

Title: MS.

BRENNAN, CYNTHIA Name: 3800 S. LECANTO HIGHWAY Address: LECANTO, FL 34461

City-St-Zip:

Title:

MORRIS, ROBERT F Name: Address: 6363 9TH AVE N.

ST PETERSBURG, FL 33743 City-St-Zip:

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: FRANK MEZZANINI VΡ 03/08/2011