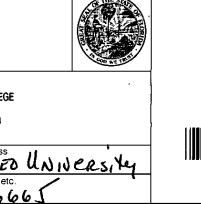
2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 708865

1. Entity Name

SAINT LEO LINIVERSITY INCORPORATED



FILED Jan 15, 2003 8:00 am Secretary of State

01-15-2003 90280 033 ****61.25

OANTI EE		T S						
Principal Place of Business SAINT LEO UNIVERSITY HIGHWAY 52 ST. LEO FL 33574		Mailing Address SAINT LEO COLLEGE HIGHWAY 52 ST. LEO FL 33574		{ 	II ALI (BISA YANG BINA BIN BISA BISA	1 214() 110() 114() 21		
2. Principal Place of Business		3. Mailing Address SAINT LEO UNIVERSITY						
Suite, Apt. #, etc. 33701 SR62		Po Sox b 665			☐ CHECK HERE IF MAKING CHANGES			
City & State		St. LEG. FC			4. FEI Number 59-1237047 Applied For Not Applicable			
Zip	Country	3 35 74	Country	j	5. Certificate of Si	tatus Desired	\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent			7. Name and Add	iress of New Register	ed Agent	
Kirk, Dr Hwy 52 Saint Lé		ddress (F	P.O. Box Number is I	Not Acceptable)		~-		
			City			ı	Zip Cod	e
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. 9. Election Campa Trust Fund Core		e required			eck Payable partment of S	
10.	OFFICERS AND DIR	 ECTORS	11.	P	ADDITIONS/CHANG	 ES TO OFFICERS AND	DIRECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZiP	T MEZZANINI, FRANK ST LEO UNIV INC-P O BOX 6665 SAINT LEO FL 33574	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Greenfelder, Glen 14217 Third Street Dade City Fl 33523	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUCKNER, ROBERT A 11 N MAIN ST BROOKSVILLE FL 34601	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-		☐ Change	Addition
STREET ADDRESS	S NEWHOFER, MARY CLARE HOLY NAME MONASTERY - POB ST LEO FL 33574	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		whoFe		₹ Change	☐ Addition
	D DEMPSEY, THOMAS L 5327 COBBLESTONE COURT WESLEY CHAPEL FL 33543	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bud 3800	CKRIDGE, DGTIBAMI MPA.F	Thomas CHR, FO	☐ Change	Addition
	D CABOT, ROBERT J 13540 TENTH ST DADE CITY FL 33525	■ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	mcI 706	NEVITT S N. FRA MPA FO	heila nklinst	Change	Addition

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 attacharely with an address, with all other like empowered.

SIGNATURE:

AFRENTUR F. KIRK, JE/PRESIDENT 1/7/03