## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 708865** 

**Entity Name: SAINT LEO UNIVERSITY INCORPORATED** 

Jan 12, 2018 Secretary of State CC8013650938

**FILED** 

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

33701 SR 52

SAINT LEO. FL 33574

## **Current Mailing Address:**

PO BOX 6665 MC 2246

ST. LEO. FL 33574

FEI Number: 59-1237047 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

33701 STATE RD 52

SAINT LEO FL 33574

LENNOX, DR. WILLIAM 33701 SR 52 MC2187 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: DR. WILLIAM LENNOX 01/12/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Address

City-State-Zip:

City-State-Zip:

Title INTERIM VP, CFO Title SECRETARY

Name DETUCCIO, JAMES Name KADDAOURI, THAMIR AJR

Address PO BOX 6665

City-State-Zip:

MC 2246

ST. LEO FL 33574

City-State-Zip: ST. LEO FL 33574

 Title
 VC
 Title
 PRESIDENT

 Name
 O'KEEFE, MARY

Address PO BOX 6665

Name LENNOX, DR. WILLIAM

MC 2246 Address PO BOX 6665

MC 2246 ST. LEO FL 33574

Title CHAIRMAN
Name MARY, O'KEEFE

Address PO BOX 6665

MC 2246

City-State-Zip: ST. LEO FL 33574

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: JAMES DETUCCIO INTERIM VP/CFO