## 2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000869

Entity Name: KETTERING UNIVERSITY, INC.

**Current Principal Place of Business:** 

1700 UNIVERSITY AVENUE FLINT. MI 48504-6214

**Current Mailing Address:** 

1700 UNIVERSITY AVENUE FLINT. MI 48504-6214 US

FEI Number: 38-2410852 Certificate of Status Desired: Yes

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

**FILED** Feb 06, 2019

**Secretary of State** 

1777262626CC

Officer/Director Detail:

Title Title ST

MCMAHAN, ROBERT K BOON, JANE E Name Name

1700 UNIVERSITY AVENUE 1700 UNIVERSITY AVE Address Address

City-State-Zip: FLINT MI 48504 FLINT MI 48504-6214 City-State-Zip:

Title **TRUSTEE** Title **TREASURER** 

AYERS, THOMAS W Name TREMBLAY, DIANA D Name Address 1700 UNIVERSITY AVE Address 1700 UNIVERSITY AVENUE

FLINT MI 48504 City-State-Zip: FLINT MI 48504-6214 City-State-Zip:

Title VC Title **CHAIRMAN** 

Name ARDISANA, LIZABETH A ARCANGELI, HENIO R Name Address 1700 UNIVERSITY AVE 1700 UNIVERSITY AVE Address

City-State-Zip: FLINT MI 48504 City-State-Zip: FL MI 48504

Title **TRUSTEE** Title **TRUSTEE** 

BORST, WALTER G Name BAILO, CARLA J Name 1700 UNIVERSITY AVE Address 1700 UNIVERSITY AVE Address City-State-Zip: FLINT MI 48504

City-State-Zip: FLINT MI 48504

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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.

02/06/2019 SIGNATURE: THOMAS W AYERS TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title TRUSTEE

Name CHAFFIN, DONALD B
Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name COWGER, GARY L
Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name DUTCHER, PHILLIP C
Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name KETTERING, CHARLES F III
Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name MANSUETTI, MICHAEL
Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE Name NAIR, RAJ

Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name SORGE, MARJORIE
Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name SZYDLOWSKI, NORMAN J Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name KAZYAK, DAVID

Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name COVENTRY, BRUCE D
Address 1700 UNIVERSITY AVE
City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name DEDO, JACQUELINE A
Address 1700 UNIVERSITY AVE
City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name HOYTE, DAVID S

Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name LOPEZ, JESSE M

Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name MOYER, JOHN W

Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name OWENS, JEFFREY J
Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name ST JAMES, LYN

Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504

Title TRUSTEE

Name SCOTT, RAYMOND E
Address 1700 UNIVERSITY AVE

City-State-Zip: FLINT MI 48504