

2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000238

Entity Name: SISTERS OF ST. JOSEPH OF CARONDELET, ST. LOUIS
PROVINCE CORPORATION**Current Principal Place of Business:**6400 MINNESOTA AVENUE
ST. LOUIS, MO 63111**Current Mailing Address:**6400 MINNESOTA AVENUE
ST. LOUIS, MO 63111**FEI Number: 43-6000007****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CT CORPORATION
1200 S. PINE ISLAND RD #250
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: CT CORPORATION****03/29/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SCHULZ, MARGARET CSJ
Address 6400 MINNESOTA AVENUE
City-State-Zip: ST. LOUIS MO 63111

Title VP
Name HEREFORD, AMY CSJ
Address 6400 MINNESOTA AVENUE
City-State-Zip: ST. LOUIS MO 63111

Title SECRETARY
Name MAHER, FRAN CSJ
Address 6400 MINNESOTA AVENUE
City-State-Zip: ST. LOUIS MO 63111

Title TREASURER
Name JOHNSON, MARY CSJ
Address 6400 MINNESOTA AVENUE
City-State-Zip: ST. LOUIS MO 63111

Title DIRECTOR
Name JANSSEN, JEANNE CSJ
Address 6400 MINNESOTA AVENUE
City-State-Zip: ST. LOUIS MO 63111

Title DIRECTOR
Name TIPTON, RUTH CSJ
Address 6400 MINNESOTA AVENUE
City-State-Zip: ST. LOUIS MO 63111

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: MARY JOHNSON**TREASURER****03/29/2023**

Electronic Signature of Signing Officer/Director Detail

Date