

**2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000003798

**FILED**  
**Jan 30, 2013**  
**Secretary of State**  
**CC5995212546**

**Entity Name:** STONEHILL COLLEGE, INC.

**Current Principal Place of Business:**

320 WASHINGTON ST  
GENERAL COUNSEL'S OFFICE  
EASTON, MA 02357

**Current Mailing Address:**

320 WASHINGTON ST  
GENERAL COUNSEL'S OFFICE  
EASTON, MA 02357

**FEI Number:** 04-2104229

**Certificate of Status Desired:** No

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

INCorp SERVICES, INC.  
17888 67TH CT NORTH  
LOXAHATCHEE, FL 33470 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

**Officer/Director Detail :**

Title C  
Name MAY, THOMAS  
Address 320 WASHINGTON ST  
City-State-Zip: EASTON MA 02357

Title VC  
Name DEVIN, WILLIAM  
Address 320 WASHINGTON ST  
City-State-Zip: EASTON MA 02357

Title P  
Name CREGAN, MARK T  
Address 320 WASHINGTON ST  
City-State-Zip: EASTON MA 02357

Title S  
Name FLYNN, THOMAS V  
Address 320 WASHINGTON ST  
City-State-Zip: EASTON MA 02357

Title T  
Name FINLAYSON, JEANNE M  
Address 320 WASHINGTON ST  
City-State-Zip: EASTON MA 02357

Title T  
Name BOGAN, THOMAS F  
Address 880 WINTER ST  
City-State-Zip: WALTHAM MA 02451

*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:** THOMAS V. FLYNN

**GENERAL COUNSEL**

**01/30/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date