

**2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000000752

**Entity Name:** COLLEGIUM AUGUSTINIANUM GRADUATE SCHOOL OF PHILOSOPHY AND THEOLOGY, INC.**Current Principal Place of Business:**1910 COCHRAN RD., #990  
PITTSBURGH, PA 15220**Current Mailing Address:**1910 COCHRAN RD., #990  
PITTSBURGH, PA 15220 US**FEI Number: 46-0871316****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENTS INC  
7901 4TH STREET N,  
SUITE 300  
ST.PETERSBURG, FL 33702 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:** BILL HAVRE

02/17/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TRUSTEE  
Name DE PAULO, CRAIG J.N. MOST REV. DR.  
Address 1910 COCHRAN RD., #990  
City-State-Zip: PITTSBURGH PA 15220

Title TRUSTEE, SECRETARY  
Name DE PAULO, CATHERINE C  
Address 1910 COCHRAN ROAD, #990  
City-State-Zip: PITTSBURGH PA 15220

Title RECTOR AND TRUSTEE  
Name MESSINA, PATRICK A DR.  
Address 1910 COCHRAN ROAD, #990  
City-State-Zip: PITTSBURGH PA 15220

Title TRUSTEE  
Name CARROLL, THOMAS D. REV. DR.  
Address 1910 COCHRAN ROAD, #990  
City-State-Zip: PITTSBURGH PA 15220

Title VICE RECTOR FOR FINANCIAL AFFAIRS  
Name HILEMAN, THOMAS R. CPA  
Address 1910 COCHRAN ROAD, #990  
City-State-Zip: PITTSBURGH PA 15220

*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:** MOST REV. DR. CRAIG J. N. DE PAULO

CHANCELLOR

02/17/2022

Electronic Signature of Signing Officer/Director Detail

Date