

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00765

Entity Name: UNIVERSITY OF ST. FRANCIS CORPORATION**Current Principal Place of Business:**500 N. WILCOX STREET
JOLIET, IL 60435**Current Mailing Address:**500 N. WILCOX STREET
JOLIET, IL 60435**FEI Number:** 36-2170999**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCCOY, JANICE
3330 SPARTINA AVE.
MERRITT ISLAND, FL 32953 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	P
Name	ROSS, J. D.
Address	500 N. WILCOX STREET
City-State-Zip:	JOLIET IL 60435

Title	D
Name	BASS, MARK D
Address	500 N. WILCOX STREET
City-State-Zip:	JOLIET IL 60435

Title	S
Name	VINCIGUERRA, MICHAEL J
Address	500 N. WILCOX STREET
City-State-Zip:	JOLIET IL 60435

Title	T
Name	LAKEN, ELIZABETH
Address	500 N. WILCOX STREET
City-State-Zip:	JOLIET IL

Title	D
Name	BUCHANAN, DEWITT
Address	500 N. WILCOX STREET
City-State-Zip:	JOLIET IL 60435

Title	D
Name	BARON, ROBERT J
Address	500 N. WILCOX STREET
City-State-Zip:	JOLIET IL 60435

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: MICHAEL J. VINCIGUERRA**SECRETARY****02/01/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date