

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 813287

FILED
Jan 20, 2012
Secretary of State

Entity Name: THE UNIVERSITY OF NOTRE DAME DU LAC

Current Principal Place of Business:

UNIVERSITY OF NOTRE DAME
NOTRE DAME AVE
NOTRE DAME, IN 46556 US

New Principal Place of Business:

Current Mailing Address:

203 MAIN BUILDING
NOTRE DAME, IN 46556 US

New Mailing Address:

FEI Number: 35-0868188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: JENKINS, JOHN I
Address: 400 MAIN BUILDING
City-St-Zip: NOTRE DAME, IN 46556

Title: S
Name: CORR, MARIANNE
Address: 203 MAIN BUILDING
City-St-Zip: NOTRE DAME, IN 46556

Title: T
Name: AFFLECK-GRAVES, JOHN F
Address: 400 MAIN BUILDING
City-St-Zip: NOTRE DAME, IN 46556

Title: D
Name: BURISH, THOMAS G
Address: 300 MAIN BUILDING
City-St-Zip: NOTRE DAME, IN 46556

Title: D
Name: MALPASS, SCOTT C
Address: 1251 N. EDDY STREET, SUITE 400
City-St-Zip: SOUTH BEND, IN 46817

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: MARIANNE CORR

S

01/20/2012

Electronic Signature of Signing Officer or Director

Date