

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005160

FILED
Jun 25, 2009
Secretary of State

Entity Name: AVE MARIA SCHOOL OF LAW, INC.

Current Principal Place of Business:

3475 PLYMOUTH RD
ANN ARBOR, MI 481052550

New Principal Place of Business:

1025 COMMONS CIRCLE
NAPLES, FL 34119

Current Mailing Address:

3475 PLYMOUTH RD
ANN ARBOR, MI 481052550

New Mailing Address:

1025 COMMONS CIRCLE
NAPLES, FL 34119

FEI Number: 38-3519708 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

R&A AGENTS, INC. ATTN: WILLIAM R. O'NEILL
850 PARK SHORE DR, TRIANON CENTRE, 3RD FL
NAPLES, FL 34103 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: CD () Delete
Name: MONAGHAN, THOMAS S
Address: 3475 PLYMOUTH RD
City-St-Zip: ANN ARBOR, MI 481052550

Title: PST () Delete
Name: DOBRANSKI, BERNARD
Address: 3475 PLYMOUTH RD
City-St-Zip: ANN ARBOR, MI 481052550

Title: D () Delete
Name: CONLIN, PATRICK J
Address: 3475 PLYMOUTH RD
City-St-Zip: ANN ARBOR, MI 481052550

Title: D () Delete
Name: COYNE, JOHN T
Address: 3475 PLYMOUTH RD
City-St-Zip: ANN ARBOR, MI 481052550

Title: D () Delete
Name: EGAN, EDWARD
Address: 3475 PLYMOUTH RD
City-St-Zip: ANN ARBOR, MI 481052550

Title: D () Delete
Name: GARLICK, THOMAS B
Address: 3475 PLYMOUTH RD
City-St-Zip: ANN ARBOR, MI 481052550

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LEN SANCHEZ

SR A

06/25/2009

Electronic Signature of Signing Officer or Director

Date