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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

F96000006324 (5)

SHU FL, INC.

FILED Mar 24 1997 8:00am Secretary of State

Principal Place of Business C/O SACRED HEART UNIVERSITY, INC. 5151 PARK AVENUE FAIRFIELD CT 06432-1023			Mailing Address C/O SACRED HEART UNIVERSITY, INC. 5151 PARK AVENUE FAIRFIELD CT 06432-1023			3. Date incorporated or Qualifie		of Last Re	eport	
							12/05/1996			
2. Principal Place of Business			2a. Mailing Address			4. FEI Number 06-1	1470397	Ap	plied For	
21 Suite, Ar	vi # elc		26] Suite, Ap	ot # etc			ALLEDION		\$8.75 A	t Applicable
22	,		27	., .,			5. Certificate of Status Desired	X	Fee Re	
City & St	ate		City & Sta	ate			6. Election Campaign Financing Trust Fund Contribution	,	\$5.00 Added t	
Z _i p	C	ountry	Zip	·	Country	/	8. This corporation has liability	for intangible ta	x under s.	199.032,
24	25		29		30		Florida Statutes	Yes 🔀		
	9. Name and A	ddress of Curre	ent Registered Age	ent	81	T NI====	10. Name and Address of New	Registered Ag	ent	
0000	004710N 05040F	COMPANY			01	Name				
CORPORATION SERVICE COMPANY 1201 HAYS STREET						Street Add	eet Address (P.O. Box Number is Not Acceptable)			
	HASSEE FL 32301	.9595			83					
inuan	INOUEL IL UZUUI	-2020				<u> </u>				
					84	City		FL	85 Zip (Code
SIGNATURI	Signature typed or ponte		agent and to cit applicable		13.	ent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OI			
12 .	Signature Typed or printe	OFFICERS A	ND DIRECTORS	(NO	13. 1.1 TITLE	ent signature requi		FICERS AND D	DIRECTOR Change	
12. THEF NAME	PD CERNERA, AN	OFFICERS A	ND DIRECTORS		13. 1.1 TITLE 1.2 NAME			FICERS AND D		
12. THE NAME STREEL ADDRES	PD CERNERA, AN 71 ROUND HI	OFFICERS A THONY J ILL DRIVE	ND DIRECTORS		13. 1.1 TITLE 1.2 NAME 1.3 STREE	1 ADDRESS		FICERS AND D		
12. THEF NAME	PD CERNERA, AN 71 ROUND HI FAIRFIELD CT	OFFICERS A THONY J ILL DRIVE	ND DIRECTORS		13. 1.1 TITLE 1.2 NAME	1 ADDRESS		FICERS AND E		Addition
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4. I do hereby certify that the information supplied with/his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is rule and accurate and that my signature shall have the same legal effect as if made under oath; the Lam an officer or director of the corporation or life receiver-og trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 6 on an attrophism with an address.

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER O

3/8/97

Dafe Daytime Phone ▼ 0001062