## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 05, 2003 8:00 am Secretary of State

DOCUMENT # NO200002107  1. Entity Name UNIVERSITY OF ST. AUGUSTINE FOR HEALTH SCIENCES ALUMNI ASSOCIATION, INC.  Principal Place of Business  Mailing Address						04-21-2003 911	85 017 ****	61.25	
Principal Place of Business Mailing Address  1 UNIVERSITY BLVD.  ST. AUGUSTINE FL 32089-5783 ST. AUGUSTINE FL 3					} } }	ana kan esak ann ann each a	<b>e</b> tni <b>40</b> 010 (140): 110): 1	<b>e</b> rik 1888 (881)	
2. Principal I	Place of Business	3. Mailing Add	Iress ·	<del></del>					
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State			City & State		4. FEI Number Applied For Not Applicable			}	
Zip	Country	Zip		Country	5. Certificate of St		\$8.75 Ad Fee Require		
	6. Name and Address of Curr	ent Registered Agen	<u></u>	Name	7. Name and Add	ress of New Register	red Agent		┨
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	ersity blvd. Gustine Fl 32086-5783			Street Address (	P.O. Box Number is f	Not Acceptable)			
- <u>-</u>				City			FL Zip Cod		
	e named entity submits this statemer ations of registered agent.	nt for the purpose of cl	hanging its regist	tered office or register	ed agent, or both, in	the State of Florida. I	am familiar with,	and accept	]
SIGNATURE	Signature, typed or printed name of registered a	Do Do	1R4	ol .		4//	3		
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Indicated on this report or supplied with this filling does not flat my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with air other like empowered.

GNATURE

GNATURE

Date

Designing Proces

Designing Proces

SIGNATURE: