

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011010

FILED
Apr 27, 2005
Secretary of State

Entity Name: ST. THOMAS UNIV CPM INC.,

Current Principal Place of Business:

UNIVERSITY CHAPEL
16401 NW 37TH AVE
MIAMI, 33055

New Principal Place of Business:

UNIVERSITY CHAPEL
16401 NW 37TH AVE
MIAMI, FL 33055

Current Mailing Address:

17355 SW 33RD COURT
MIRAMAR, FL 33029

New Mailing Address:

FEI Number: 20-1927715 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EZEWIKE, FIDELIS
17355 SW 33RD COURT
MIAMI, FL 33017 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 () Delete
Name: EZEWIKE, FIDELIS
Address: PO BOX 172101
City-St-Zip: MIAMI, FL 33017

Title: V () Delete
Name: NWADIKE, EMMANUEL V
Address: 2238 S MIAMI AVENUE
City-St-Zip: MIAMI, FL 33129

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NWOSU, ADOLPHUS
Address: PO BOX 172101
City-St-Zip: MIAMI, FL 33017

Title: V (X) Change () Addition
Name: NZERUE, CYRIL DR
Address: PO BOX 172101
City-St-Zip: MIAMI, FL 33017

Title: S () Change (X) Addition
Name: LEWIS, KEVIN
Address: PO BOX 172101
City-St-Zip: MIAMI, FL 33017

Title: F () Change (X) Addition
Name: ANYAKUDO, FESTUS
Address: PO BOX 172101
City-St-Zip: MIAMI, FL 33017

Title: T () Change (X) Addition
Name: OKORO, NGOZI
Address: PO BOX 172101
City-St-Zip: MIAMI, FL 33017

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FIDELIS EZEWIKE

PRO

04/27/2005

Electronic Signature of Signing Officer or Director

Date