

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 24, 2012**  
**Secretary of State**

DOCUMENT# N09096

**Entity Name:** ST. GERARD CAMPUS, INC.**Current Principal Place of Business:**1405 U S 1 SOUTH  
ST AUGUSTINE, FL 32084**New Principal Place of Business:****Current Mailing Address:**PO BOX 4382  
ST AUGUSTINE, FL 320854382 US**New Mailing Address:****FEI Number:** 59-2483955**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**WHITEHOUSE, JAMES ESQ  
21 MAGNOLIA DUNE CIRCLE  
ST AUGUSTINE, FL 32080 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: D  
Name: GREENFIELD, PAT SEC.  
Address: 215 4TH STREET  
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: D  
Name: WOLFF, CAROLINE EX.DIR  
Address: 211 DELTONA BLVD  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: DR.  
Name: JUDE, NWOGA PRES.  
Address: 1205 ELLINGTON COURT  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D  
Name: ZEIMANN, RICHARD VP  
Address: 13 RIVERBEND DRIVE  
City-St-Zip: PALM COAST, FL 32137

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: CAROLINE A. WOLFF

DIR.

04/24/2012

Electronic Signature of Signing Officer or Director

Date