

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04292

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** UNION INSTITUTE & UNIVERSITY, INC.

**Current Principal Place of Business:**

440 E. MCMILLAN STREET  
CINCINNATI, OH 452061925 US

**New Principal Place of Business:**

**Current Mailing Address:**

440 E. MCMILLAN STREET  
CINCINNATI, OH 452061925 US

**New Mailing Address:**

**FEI Number:** 31-0747997

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WATNICK, BERYL L PHD  
VENTURE CENTRE, SUITE 102  
16853 NE SECOND AVENUE  
N. MIAMI BEACH, FL 33162 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  
**Name:** SUBLETT, ROGER H PHD  
**Address:** 440 E. MCMILLAN ST.  
**City-St-Zip:** CINCINNATI, OH 45206

**Title:** DC  
**Name:** WILTSE, VIRGINIA PHD  
**Address:** 440 E. MCMILLAN ST  
**City-St-Zip:** CINCINNATI, OH 452061925

**Title:** D  
**Name:** OVERTON-ADKINS, BETTY PHD  
**Address:** 440 E. MCMILLAN ST  
**City-St-Zip:** CINCINNATI, OH 452061925

**Title:** D  
**Name:** FELDMANN, DON  
**Address:** 440 E. MCMILLAN ST  
**City-St-Zip:** CINCINNATI, OH 452061925

**Title:** S  
**Name:** BONNER, ETHEL  
**Address:** 440 E MCMILLAN ST  
**City-St-Zip:** CINCINNATI, OH 45206

**Title:** D  
**Name:** KANTER, JOEL  
**Address:** 440 E. MCMILLAN ST  
**City-St-Zip:** CINCINNATI, OH 452961925

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:** EDWARD E WALTON

CFO

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date