

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702242

Entity Name: UNIVERSITY OF MIAMI

Current Principal Place of Business:

1252 MEMORIAL DR.
CORAL GABLES, FL 33146

Current Mailing Address:

OFFICE OF THE SECRETARY
P.O. BOX 248052
CORAL GABLES, FL 33124 US

FEI Number: 59-0624458

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ORANGE, ANDREA E
1320 SOUTH DIXIE HIGHWAY
SUITE 1200
CORAL GABLES, FL 33146 US

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

Officer/Director Detail :

Title P
Name SHALALA, DONNA E
Address 1252 MEMORIAL DR., ASHE BLDG.,
RM. 230
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name LEBLANC, THOMAS J
Address 1252 MEMORIAL DR., ASHE BLDG.,
RM. 230
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name NATOLI, JOSEPH
Address 1252 MEMORIAL DR., ASHE BLDB.,
RM. 230
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name UGALDE, AILEEN MGC
Address 1320 S. DIXIE HWY, SUITE 1230
City-State-Zip: CORAL GABLES FL 33146

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: AILEEN M. UGALDE

SECRETARY

04/25/2013

Electronic Signature of Signing Officer/Director Detail

Date