

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 703251

**Entity Name:** ST. THOMAS UNIVERSITY, INC.

**Current Principal Place of Business:**

16401 NORTHWEST 37TH AVENUE  
ADMINISTRATIVE AFFAIRS  
MIAMI GARDENS, FL 33054

**Current Mailing Address:**

16401 NORTHWEST 37TH AVENUE  
ADMINISTRATIVE AFFAIRS  
MIAMI GARDENS, FL 33054

**FEI Number:** 59-0949880

**Certificate of Status Desired:** Yes

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

FITZGERALD, J. PATRICK ESQ.  
110 MERRICK WAY  
SUITE 3-B  
CORAL GABLES, FL 33134 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 CASALE, FRANKLYN MREV MSG  
Address 16401 N.W. 37TH. AVENUE  
City-State-Zip: MIAMI GARDENS FL 33054

Title CT  
Name DOONER, JOHN J.  
Address 17 STATE STREET  
City-State-Zip: NEW YORK NY 10004

Title VCT  
Name SHAY, RODGER D  
Address 1000 BRICKELL AVENUE,  
City-State-Zip: MIAMI FL 33131

Title ST  
Name JOLLIVETTE, CYRUS M  
Address 4800 DEERWOOD CAMPUS PARKWAY  
City-State-Zip: DCC1-8 JACKSONVILLE FL 32246

Title VP  
Name O'CONNOR, TERRENCE L  
Address 16401 N.W. 37TH AVE.  
City-State-Zip: MIAMI GARDENS FL 33054

Title AST  
Name ANTELO, JESSICA  
Address 16401 NW 37TH AVENUE  
City-State-Zip: MIAMI GARDENS FL 33054

*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:** TERRENCE L. O'CONNOR

01/29/2014

VICE PRESIDENT FOR  
ADMINISTRATION AND  
CHIEF FINANCIAL  
OFFICER

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Electronic Signature of Signing Officer/Director Detail

Date