

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703251

Entity Name: ST. THOMAS UNIVERSITY, INC.

FILED
Jan 10, 2017
Secretary of State
CC8322489996

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 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

Title PROVOST, VP ACADEMIC AFFAIRS
Name BECERRA, IRMA
Address 16401 NORTHWEST 37TH AVENUE
ADMINISTRATIVE AFFAIRS
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

01/10/2017

VICE PRESIDENT FOR
ADMINISTRATION &
CHIEF FINANCIAL
OFFICER

Electronic Signature of Signing Officer/Director Detail

Date