2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011815

Entity Name: ST. JUDE MEDICAL MISSIONS CORP

FILED May 03, 2015 **Secretary of State** CC6128475607

Current Principal Place of Business:

131 N. MOON AVENUE SUITES 3 & 4 BRANDON, FL 33510

Current Mailing Address:

4810 PORTOBELLO CIR VALRICO, FL 33596

FEI Number: 45-5161064 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

OKOYE, G. STANLEY MD, PHD 131 N. MOON AVENUE SUITES 3 & 4 BRANDON, FL 33510 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:

City-State-Zip:

City-State-Zip:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title

OKOYE, G. STANLEY DR. POLLICH, JOETTA Name Name 4810 PORTOBELLO CIR 131 N. MOON AVENUE Address Address

SUITES 3 & 4

City-State-Zip: VALRICO FL 33596 City-State-Zip: BRANDON FL 33510

Title SEC

Title OFFICER OKOYE, IFEOMA F DR. Name

Name NKUMBE, HENRY DR. 131 N. MOON AVENUE Address

Address 131 N. MOON AVENUE SUITES 3 & 4

SUITES 3 & 4 BRANDON FL 33510

City-State-Zip: BRANDON FL 33510

Title **OFFICER** Title CHAPLAIN/OFFICER

IDUSIYI, OSARETIN B DR. Name LOONEY, CHARLES REV. Name Address 131 N. MOON AVENUE

Address 131 N. MOON AVENUE SUITES 3 & 4

SUITES 3 & 4

BRANDON FL 33510

City-State-Zip: BRANDON FL 33510

Title OTHER (RELIGIOUS NUN - SISTERS Title **OFFICER** OF THE DIVINE MERCY)

Name ONYEDIKA, MICHAEL ENGR. Name UBAKA, CHRISTIANA DR. (SR)

131 N. MOON AVENUE Address Address 131 N. MOON AVENUE **SUITES 3 & 4**

SUITES 3 & 4

City-State-Zip: BRANDON FL 33510 City-State-Zip: BRANDON FL 33510

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.

05/03/2015 SIGNATURE: G. STANLEY OKOYE **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date