

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44225

Entity Name: ADVENTIST UNIVERSITY OF HEALTH SCIENCES, INC.**Current Principal Place of Business:**671 WINYAH DRIVE
ORLANDO, FL 32803**Current Mailing Address:**671 WINYAH DRIVE
ORLANDO, FL 32803 US**FEI Number:** 59-3069793**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GREENLAW, DAVID E.
671 WINYAH DRIVE
ORLANDO, FL 32803 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 PRESIDENT, SECRETARY
Name GREENLAW, DAVID E
Address 800 LAKE ESTELLE DRIVE
City-State-Zip: ORLANDO FL 32803

Title VP, CHAIRMAN
Name HOUMANN, LARS
Address 2617 ORCHARD DRIVE
City-State-Zip: APOPKA FL 32712

Title TRUSTEE
Name JONES, DON
Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title TRUSTEE
Name CAULEY, MICHAEL
Address 655 N. WYMORE ROAD
City-State-Zip: WINTER PARK FL 32789

Title TRUSTEE
Name ANDREWS, DIANE
Address 1821 ALAQUA DRIVE
City-State-Zip: LONGWOOD FL 32779

Title TRUSTEE
Name HENDERSCHIEDT, ROBERT
Address 900 HOPE WAY
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title VC
Name SMITH, RON
Address P. O. BOX 849
City-State-Zip: DECATUR GA 30031

Title TRUSTEE
Name DIXON, DARYL
Address 400 INTERNATIONAL PARKWAY
SUITE 300
City-State-Zip: LAKE MARY FL 32746

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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: DAVID GREENLAW**PRESIDENT****01/28/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name SILVER, STEVE
Address THREE MILL ROAD
SUITE 300
City-State-Zip: WILMINGTON DE 19806

Title TRUSTEE
Name KUHLMAN, JEFF
Address 45055 RIVEREDGE DRIVE
SUITE 250
City-State-Zip: TAMPA FL 33637

Title TRUSTEE
Name WERNER, THOMAS
Address 1670 CR 452
City-State-Zip: EUSTIS FL 32726

Title TRUSTEE
Name TOL, DARYL
Address 1420 SHADY MEADOWS LANE
City-State-Zip: DELAND FL 32724