

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44225

Entity Name: ADVENTHEALTH UNIVERSITY, 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:**BROMME, JEFF
900 HOPE WAY
ALTAMONTE SPRINGS, FL 32714 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:** JEFF BROMME

01/16/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title TRUSTEE
Name CLEM, KATHLEEN
Address 671 WINYAH DRIVE
City-State-Zip: ORLANDO FL 32803

Title CHAIRMAN
Name HAFFNER, RANDALL
Address 671 WINYAH DRIVE
City-State-Zip: ORLANDO FL 32803

Title TRUSTEE
Name MILES, RACHEL
Address 671 WINYAH DRIVE
City-State-Zip: ORLANDO FL 32803

Title TRUSTEE
Name OTTATI, DAVID
Address 14055 RIVEREDGE DRIVE
SUITE 150
City-State-Zip: TAMPA FL 33637

Title TRUSTEE
Name CUMMINGS, DES
Address 671 WINYAH DRIVE
City-State-Zip: ORLANDO FL 32803

Title TRUSTEE
Name HUBBELL, GERALD
Address 671 WINYAH DRIVE
City-State-Zip: ORLANDO FL 32803

Title TRUSTEE
Name KUHLMAN, JEFF
Address 671 WINYAH DRIVE
City-State-Zip: ORLANDO FL 32803

Continues on page 2

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: RANDALL HAFFNER

CHAIRMAN

01/16/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name LUXTON, ANDREA
Address 671 WINYAH DRIVE
City-State-Zip: ORLANDO FL 32803

Title TRUSTEE
Name MACHADO, ALLAN
Address 671 WINYAH DRIVE
City-State-Zip: ORLANDO FL 32803