

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837225

Entity Name: POMONA COLLEGE**Current Principal Place of Business:**550 N. COLLEGE AVENUE
CLAREMONT, CA 91711**Current Mailing Address:**550 N. COLLEGE AVENUE
#238
CLAREMONT, CA 91711 US**FEI Number:** 95-1664112**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SLICKER, WILLIAM D.
5505 38TH AVENUE N.
ST. PETERSBURG, FL 33710 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:** WILLIAM D. SLICKER

03/25/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	GLICK, SAMUEL D.
Address	550 N. COLLEGE AVENUE
City-State-Zip:	CLAREMONT CA 91711

Title	PRESIDENT
Name	STARR, G. GABRIELLE
Address	550 N. COLLEGE AVENUE
City-State-Zip:	CLAREMONT CA 91711

Title	VP, CHIEF OPERATING OFFICER AND TREASURER
Name	ROTH, JEFF
Address	550 N. COLLEGE AVENUE
City-State-Zip:	CLAREMONT CA 91711

Title	SECRETARY
Name	CIAMBRIELLO, CHRISTINA
Address	550 N. COLLEGE AVENUE
City-State-Zip:	CLAREMONT CA 91711

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: CHRISTINA CIAMBRIELLOCHIEF OF STAFF &
SECRETARY TO THE
BOARD OF TRUSTEES

03/25/2024

Electronic Signature of Signing Officer/Director Detail

Date