

2025 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000004837

Entity Name: HILBERT COLLEGE, INC.**Current Principal Place of Business:**5200 PARK AVE.
HAMBURG, NY 14075**Current Mailing Address:**5200 PARK AVE.
HAMBURG, NY 14075**FEI Number:** 16-6031585**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 N. CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301 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	C
Name	CARRA, LAURIE B ESQ.
Address	5200 PARK AVE.
City-State-Zip:	HAMBURG NY 14075

Title	VC
Name	WILLIAMS, LAMONT
Address	5200 PARK AVE.
City-State-Zip:	HAMBURG NY 14075

Title	TRUSTEE
Name	BENNETT, ERICKA N
Address	5200 PARK AVE.
City-State-Zip:	HAMBURG NY 14075

Title	TRUSTEE
Name	BILLITTIER IV, ANTHONY J
Address	5200 PARK AVE.
City-State-Zip:	HAMBURG NY 14075

Title	TRUSTEE
Name	BRINSON, WILLIAM D
Address	5200 PARK AVE.
City-State-Zip:	HAMBURG NY 14075

Title	TRUSTEE
Name	BROPHY, MICHAEL B
Address	5200 PARK AVE.
City-State-Zip:	HAMBURG NY 14075

Title	TRUSTEE
Name	DIMARIA, SEAN REV
Address	5200 PARK AVE.
City-State-Zip:	HAMBURG NY 14075

Title	TRUSTEE
Name	FIUTKO, MARCIA ANN SR.
Address	5200 PARK AVE.
City-State-Zip:	HAMBURG NY 14075

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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: DR. MICHAEL BROPHY**PRESIDENT****03/16/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title TRUSTEE
Name HAMISTER, RICHARD
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title SECRETARY
Name HEARD, TERRANCE
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name MCCABE, MICHAEL
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name SULLIVAN, MICHELLE
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name MOMMERTZ, MICHAEL
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name CONNOLLY, BRIAN J
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name SEIB, JENNIFER
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name CERVONI, MINDY
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name HANNAH, CRAIG D HON.
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name JOST, TED REV
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name RESSMAN, LISA A
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name WICHER, CAMILLE PHD
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name DONLON, MICHAEL
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name PETRUCCI, LOUIS
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name SUCHAN, RICHARD C
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075

Title TRUSTEE
Name MONACO, JIM
Address 5200 PARK AVE.
City-State-Zip: HAMBURG NY 14075