

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 19, 2016
Secretary of State
CC7343836633

Entity Name: AMERICAN PONTIFICAL CATHOLIC UNIVERSITY INC

Current Principal Place of Business:

111 2ND AVENUE N.E. 9TH FLOOR, SUITE 900
ST. PETERBURG, FL 33701

Current Mailing Address:

901 34TH AVE NORTH - 7670
ST. PETERSBURG, FL 33704

FEI Number: 20-3383037

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

R&P ACCOUNTING & TAXES, INC.
200 S.E. 1ST STREET S/604
MIAMI, FL 33131 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: ANDRES RODRIGUEZ

02/19/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name QUIROZ, JESUS MANUEL MEJIA
Address 111 2ND AVENUE N.E. 9TH FLOOR,
SUITE 900
City-State-Zip: ST. PETERSBURG FL 33701

Title P
Name PERACOLI MORENO, JOSE
APARECIDO
Address 1783 MARYLAND AVE NE
City-State-Zip: ST. PETERBURG FL 33703

Title T
Name ERDEI MORENO, LENI EUNICE
Address 200 SE 1ST STREET - STE. 604
City-State-Zip: MIAMI FL 33131

Title VP
Name MORENO, TITO MARCOS
Address 200 SE 1ST STREET - STE. 604
City-State-Zip: MIAMI FL 33131

Title D
Name RIBEIRO DA CRUZ, SHARLES
Address R. MACHADO NUNES, 175 SALGADO
FILHO
City-State-Zip: 30550-280 BELO HORIZONTE

Title D
Name MARTINS, WALTER EULER
Address AV. PAULISTA, 1159/1116 CERQUEIRA
CESAR
City-State-Zip: 01311-200 SAO PAULO

Title D
Name BENTES , ANTONIO CARLOS G
Address R. TAIMUNDO G. RESENDE, 97
OVIDIO GUERRA
33400-000
City-State-Zip: LAGOA SANTA

Title D
Name AVELINO , CHARLES BORTOLACO
Address RUA CARLOS GONCALVES, 300
JARDIM MONCOES
City-State-Zip: SANTO ANDRES 09180-290

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: JESUS MANUEL MEJIA QUIROZ

DR

02/19/2016

Electronic Signature of Signing Officer/Director Detail

Date