



**State of Rhode Island
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Non-Profit
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2022

1. Corporate ID No. 001707432

2. Name of Corporation Pepperdine University

3. State of Incorporation

State: CA

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

4. Principal Office Address

No. and Street: 24255 PACIFIC COAST HIGHWAY

City or Town: MALIBU

State: CA Zip: 90263 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

THE UNIVERSITY WOULD LIKE TO OFFER DISTANCE EDUCATION PROGRAMS TO STUDENTS IN RHODE ISLAND

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JAMES A GASH	24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263 USA
CFO	GREG RAMIREZ	26750 AGOURA ROAD

		CALABASAS, CA 91302 USA
ASSOCIATE PROVOST	DAVID M. SMITH	24255 PAIFIC COAST HWY MALIBU, CA 90263 USA
PROVOST	JAY BREWSTER	24255 PACIFIC COAST HWY. MALIBU, CA 90263 USA

7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI
02888

8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 5 Day of April, 2022 at 6:25:57 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By KIM MILLER
Signature of Authorized Person

Form No. 631
Revised 09/07

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