

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 22, 2007
Secretary of State**

DOCUMENT# N95000000166

Entity Name: UNITED CHURCH RESIDENCES OF IMMOKALEE, FLORIDA, INC.

Current Principal Place of Business:

550 HOPE CIRCLE
IMMOKALEE, FL 34142

New Principal Place of Business:

Current Mailing Address:

170 EAST CENTER ST.
MARION, OH 43302

New Mailing Address:

FEI Number: 58-2169014 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: AVPD () Delete
Name: ALLEN, BRIAN S
Address: 170 EAST CENTER ST.
City-St-Zip: MARION, OH 43302

Title: PD () Delete
Name: SPELLER, MARY ANNA
Address: 170 E. CENTER STREET
City-St-Zip: MARION, OH 43302

Title: STD () Delete
Name: BEACH, RONALD E
Address: 170 E CENTER ST.
City-St-Zip: MARION, OH

Title: ASTD () Delete
Name: WICKERSHAM, CHERYL L
Address: 170 E. CENTER ST.
City-St-Zip: MARION, OH

Title: VPD () Delete
Name: STAHLY, KAREN
Address: 170 EAST CENTER ST.
City-St-Zip: MARION, OH 43302

Title: D () Delete
Name: HART, ROBERT
Address: 170 EAST CENTER ST.
City-St-Zip: MARION, OH 43302

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RONALD E. BEACH

STD

03/22/2007

Electronic Signature of Signing Officer or Director

Date