

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000006092

**Entity Name:** UCC II, INC.

**Current Principal Place of Business:**

600 OLD COMBEE ROAD  
LAKELAND, FL 33809

**Current Mailing Address:**

170 EAST CENTER STREET  
MARION, OH 43302

**FEI Number:** 34-1789176

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 PD  
Name SPELLER, MARY ANNA  
Address 170 E CENTER ST  
City-State-Zip: MARION OH 43302

Title ASTD  
Name WICKERSHAM, CHERYL L  
Address 170 E CENTER ST  
City-State-Zip: MARION OH

Title VPD  
Name SCHROEDER, ALFRED (SAM)  
Address 170 E CENTER ST  
City-State-Zip: MARION OH

Title D  
Name KRUEGER, JOHN  
Address 170 E CENTER ST  
City-State-Zip: MARION OH

Title ASST. VICE PRESIDENT  
Name DANIEL, KENNETH V  
Address 170 EAST CENTER STREET  
City-State-Zip: MARION OH 43302

Title DIRECTOR  
Name THIEMAN, SANDY  
Address 170 EAST CENTER STREET  
City-State-Zip: MARION OH 43302

*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:** CHERYL WICKERSHAM

**ASST. SEC/TREASURER**

**04/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date