## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9500000166

Entity Name: UNITED CHURCH RESIDENCES OF IMMOKALEE, FLORIDA,

INC.

# **Current Principal Place of Business:**

550 HOPE CIRCLE IMMOKALEE, FL 34142

# **Current Mailing Address:**

170 EAST CENTER ST. MARION, OH 43302

FEI Number: 58-2169014 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

**FILED** Mar 17, 2015

**Secretary of State** 

CC7643532706

### Officer/Director Detail:

Title OTHER, ASST. VICE PRESIDENT Title PD

Name DANIEL, KENNETH V Name SPELLER, MARY ANNA Address 170 EAST CENTER ST. Address 170 E. CENTER STREET City-State-Zip: MARION OH 43302 City-State-Zip: MARION OH 43302

**ASTD** Title Title

Name WICKERSHAM, CHERYL L Name SCHROEDER, ALFRED (SAM)

Address 170 E. CENTER ST. Address 170 EAST CENTER ST. City-State-Zip: MARION OH 43302 City-State-Zip: MARION OH

Title TREASURER, SECRETARY Title DIRECTOR

Name RENNER, JOHN K Name THIEMAN, SANDY Address 170 EAST CENTER ST. 170 EAST CENTER ST. Address City-State-Zip: MARION OH 43302 MARION OH 43302 City-State-Zip:

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: MARY ANNA SPELLER

**PRESIDENT** 

03/17/2015