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Mar 10 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # 768879 (9)**

1. Corporation Name

**NATIONAL CHURCH RESIDENCES OF EASTERN, FLORIDA,
INC.**

Principal Place of Business

**3150 SPINKS RD
SEBRING FL 33870
US**

Mailing Address

**2335 N BANK DR
COLUMBUS OH 43220-5423
US**

3. Date Incorporated or Qualified

06/10/1983

3a. Date of Last Report

04/05/1996

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**MEZIE, LOU
3015 SPINKS ROAD
SEBRING FL 33870**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **SLEMMER, THOMAS W.**
STREET ADDRESS **2335 N BANK DRIVE**
CITY- ST- ZIP **COLUMBUS OH**TITLE **D** ☐ DELETE
NAME **BLAINE, WILLIAM E., JR.**
STREET ADDRESS **2335 N BANK DR**
CITY- ST- ZIP **COLUMBUS OH**TITLE **D** ☐ DELETE
NAME **JONES, JOHN L**
STREET ADDRESS **2335 N BANK DRIVE**
CITY- ST- ZIP **COLUMBUS OH**TITLE **VP** ☐ DELETE
NAME **MICHELLE H LENCKE**
STREET ADDRESS **2335 N BANK DRI**
CITY- ST- ZIP **COLUMBUS OH**TITLE **ST** ☐ DELETE
NAME **KASBERG, JOSEPH R.**
STREET ADDRESS **2335 N BANK DRIVE**
CITY- ST- ZIP **COLUMBUS OH**TITLE **D** ☐ DELETE
NAME **GIBEAUT, WILLIAM**
STREET ADDRESS **2335 NORTH BANK DRIVE**
CITY- ST- ZIP **COLUMBUS OH**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP4.1 TITLE ☒ Change ☐ Addition
4.2 NAME **VP MICHELLE H. NORRIS**
4.3 STREET ADDRESS **2335 NORTH BANK DRIVE**
4.4 CITY- ST- ZIP **COLUMBUS, OH 43220**5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH R. KASBERG

1/20/97

614-451-2151

Date Daytime Phone # 0075553

CR2E037 (9/96)