

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90038 010 ****61.25

DOCUMENT # N00000000609

1. Entity Name
NATIONAL CHURCH RESIDENCES OF ORLANDO,
FLORIDA, INC.



Principal Place of Business

5206 INDIAN HILL RD
ORLANDO, FL 32808

Mailing Address

2335 NORTH BANK DRIVE
COLUMBUS, OH 43220



01052006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
31-1693405

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VPST
KASBERG, JOSEPH R
2335 NORTH BANK DR.
COLUMBUS, OH 43220

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
PIERCE, KENNETH
2335 NORTH BANK DR.
COLUMBUS, OH 43220

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
RICKETTS, MARK R
2335 NORTH BANK DRIVE
COLUMBUS, OH 43220

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
ADAMS, RON
2335 NORTH BANK DR.
COLUMBUS, OH 43220

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
KERBER, STEVEN L
2335 NORTH BANK DRIVE
COLUMBUS, OH 43220

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
HUMPHRIES, BARRY
2335 NORTH BANK DRIVE
COLUMBUS, OH 43220

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark R. Ricketts

1/9/06
Date

614-451-2151
Daytime Phone #