

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000966

FILED
Aug 05, 2005
Secretary of State

Entity Name: UNITED CHRISTIAN GIVING, INC.

Current Principal Place of Business:

5845 RIVERSIDE LANE
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

5845 RIVERSIDE LANE
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 31-1715273 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HELMERICH, FRANK W
1560 MATTHEW DRIVE
SUITE H
FORT MYERS, FL 339071702 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: PD () Delete
Name: HELMERICH, FRANK W
Address: 5845 RIVERSIDE LN.
City-St-Zip: FORT MYERS, FL 33919

Title: VPD () Delete
Name: MOORE, LANNY JR.
Address: 1263 COCONUT DRIVE
City-St-Zip: FORT MYERS, FL 33901

Title: STD () Delete
Name: PRINGLE, RICHARD
Address: 5761 PALM BEACH BLVD
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: WHITE, WILLIAM C
Address: 15234 BRIAR RIDGE CIRCLE
City-St-Zip: FORT MYERS, FL 33912

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 Section 119.07(3)(i), 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: RICHARD W. PRINGLE

STD

08/05/2005

Electronic Signature of Signing Officer or Director

Date