

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000382

FILED
Jan 20, 2009
Secretary of State

Entity Name: MARANATHA MANOR, INC.

Current Principal Place of Business:

54 MARANATHA BLVD.
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

54 MARANATHA BLVD.
SEBRING, FL 33870

New Mailing Address:

FEI Number: 59-3704592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABLES, CLIFFORD M III
551 SOUTH COMMERCE AVE.
SEBRING, FL 33870 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: D () Delete
Name: ABRAM, THOMAS
Address: 200 MARANA THA BLVD
City-St-Zip: SEBRING, FL 33870

Title: C () Delete
Name: WILLIAMS, THOMAS
Address: 67 DANIEL RD.
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: DARLING, GEORGE
Address: 246 TIMOTHY RD
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: BELL, DUANE
Address: 207 TIMOTHY ROAD
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: DITZEL, LEON
Address: 15 GIDEON ROAD
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: HANSON, GARY
Address: 30 AMOS STREET
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BARR, ROBERT
Address: 21 MATTHEW STREET
City-St-Zip: SEBRING, FL 33870

Title: D (X) Change () Addition
Name: PAUL, WHIPPLE
Address: 51 GIDEON ROAD
City-St-Zip: SEBRING, FL 33870

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

Title: D (X) Change () Addition
Name: BELL, DUANE
Address: 54 MARANATHA BOULEVARD
City-St-Zip: SEBRING, FL 33870

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

Title: C (X) Change () Addition
Name: HANSON, GARY
Address: 26 DANIEL ROAD
City-St-Zip: SEBRING, FL 33870

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ELLEN G. REED

T

01/20/2009

Electronic Signature of Signing Officer or Director

Date