


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90091 029 ****61.25

DOCUMENT # N05000008386 1. Entity Name THE UNITED CHURCH OF CHRIST AT THE VILLAGES, INC.					
Principal Place of Business 9105 SE 170TH FONTAINE STREET THE VILLAGES, FL 32162-1891			Mailing Address 9105 SE 170TH FONTAINE STREET THE VILLAGES, FL 32162-1891		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 7605 SE 170th Broughton Pl Suite, Apt. #, etc.			
City & State Zip Country		City & State The Villages FL Zip Country 32162-8385 USA		4. FEI Number 51-0538326	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable			
6. Name and Address of Current Registered Agent WEALAND, C WILLIAM REV DR. 9105 SE 170TH FONTAINE STREET THE VILLAGES, FL 32162-1891					
7. Name and Address of New Registered Agent Name Kenneth F. Geiger, Treasurer Street Address (P.O. Box Number is Not Acceptable) 7605 SE 170th Broughton Place City The Villages FL Zip Code 32162-8385					
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 <u><i>Kenneth F. Geiger</i></u> DATE <u>April 9, 2006</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	NAME	<input type="checkbox"/> Delete			
NAME	M RILEY, KEN				
STREET ADDRESS	3343 SHELBY STREET				
CITY - ST - ZIP	THE VILLAGES, FL 32162				
TITLE	NAME	<input type="checkbox"/> Delete			
NAME	VM REUBER, DALE				
STREET ADDRESS	710 OAK BLVD				
CITY - ST - ZIP	WILDWOOD, FL 34785				
TITLE	NAME	<input type="checkbox"/> Delete			
NAME	S REUBER, MARY				
STREET ADDRESS	710 OAK BLVD				
CITY - ST - ZIP	WILDWOOD, FL 34785				
TITLE	NAME	<input type="checkbox"/> Delete			
NAME	T GEIGER, KEN				
STREET ADDRESS	7605 SE 170TH BROUGHTON PLACE				
CITY - ST - ZIP	THE VILLAGES, FL 32162				
TITLE	NAME	<input type="checkbox"/> Delete			
NAME	MC NEW, BEN REV DR.				
STREET ADDRESS	618 SAN MARINO DRIVE				
CITY - ST - ZIP	THE VILLAGES, FL 32159				
TITLE	NAME	<input type="checkbox"/> Delete			
NAME	M NEDER, MARY ANN				
STREET ADDRESS	620 JAMESTON AVENUE				
CITY - ST - ZIP	THE VILLAGES, FL 32162				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
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: <u><i>Kenneth F. Geiger</i></u> <u>4/9/06</u> <u>352-753-0229</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					