

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009357

FILED  
Apr 19, 2012  
Secretary of State

**Entity Name:** THE UPPER ROOM SANCTUARY, INC.

**Current Principal Place of Business:**

4761 PETAL PAWPAW  
ST. CLOUD, FL 34772

**New Principal Place of Business:**

**Current Mailing Address:**

4761 PETAL PAWPAW  
ST. CLOUD, FL 34772

**New Mailing Address:**

**FEI Number:** 20-3458113

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SWART BAUMRUK & COMPANY LLP  
1101 MIRANDA LANE  
KISSIMMEE, FL 34741 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  
Name: MOSER, STEVEN L  
Address: 4761 PETAL PAWPAW  
City-St-Zip: ST. CLOUD, FL 34772

Title: TD  
Name: MOSER, JUDY J  
Address: 4761 PETAL PAWPAW  
City-St-Zip: ST. CLOUD, FL 34772

Title: VD  
Name: THOMAS, SCOTT C  
Address: 2725 LAKE VISTA DR.  
City-St-Zip: KISSIMMEE, FL 34744

Title: SD  
Name: THOMAS, CHERYL W  
Address: 2725 LAKE VISTA DR.  
City-St-Zip: KISSIMMEE, FL 34744

I hereby 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 all other like empowered.

SIGNATURE: STEVEN MOSER

PRES

04/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date