

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2006 8:00 am
Secretary of State

07-21-2006 90029 039 ****61.25

DOCUMENT # N05000012725 1. Entity Name NATIONAL CHURCH RESIDENCES OF ISLAND HORIZONS HOUSING III, INC.			
Principal Place of Business 2335 NORTH BANK DRIVE COLUMBUS, OH 43220		Mailing Address 2335 NORTH BANK DRIVE COLUMBUS, OH 43220	
2. Principal Place of Business 2335 North Bank Dr. Suite, Apt. #, etc.		3. Mailing Address 2335 North Bank Dr. Suite, Apt. #, etc.	
City & State Columbus, OH Zip 43220		City & State Columbus OH Zip 43220	
Country USA		Country USA	
4. FEI Number 20-4006301		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>			
Filing Fee is \$61.25 Due by September 8, 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
please see attached			
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: <small>SIGNATURE AND TITLE OF REGISTERED AGENT OR DIRECTOR</small>			
Date: 7/11/06 Daytime Phone #: 614-451-2151			

List of All Principal Participants

Names and Addresses of All Known Principals and Affiliates (people, businesses and organizations) proposing to participate in the project described above. (List names alphabetically; last, first, middle initial.)

Directors	Role of Each	% Ownership
Humphries, Barry K. 2335 North Bank Drive, Columbus, OH 43220	Director	0%
Kerber, Steven R. 2335 North Bank Drive, Columbus, OH 43220	Director	0%
Pierce, A. Kenneth 2335 North Bank Drive, Columbus, OH 43220	Director	0%
Officers	Role of Each	% Ownership
Slemmer, Thomas W. 2335 North Bank Drive, Columbus, OH 43220	President	0%
Kasberg, Joseph R. 2335 North Bank Drive, Columbus, OH 43220	VP/Secretary/Treasurer	0%
Norris, Michelle H. 2335 North Bank Drive, Columbus, OH 43220	Vice President	0%
Ricketts, Mark R. 2335 North Bank Drive, Columbus, OH 43220	Vice President	0%

ATTACHMENT
66022671
#NO 000012725

ATTACHMENT

66032641

#NO500012725

IMPORTANT NOTICE

This will serve as your 60 days notice that the business entity listed on this postcard will be administratively dissolved/revoked and an additional reinstatement fee will be due if the annual report is not properly filed and the appropriate fee paid by September 6, 2006.

Visit our website at www.sunbiz.org for fee information.

OPTION 1 - File Online - Processed within 24-48 hours!



- Visit www.sunbiz.org and click icon to file annual report online.
- Available 24 hours a day, 7 days a week.
- Mastercard, Visa, American Express, or Discover accepted.

**OPTION 2 - Download form
Processed within 7-10 days of receipt.**

- Visit www.sunbiz.org and click icon to download preprinted form.
- Submit form with check or money order payable to FL. Dept. of State.

Visit your local public library for free Internet access and assistance.



PLACE
PROPER
POSTAGE
HERE
BEFORE
MAILING

TO:

Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314-6198

