

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006308

FILED
Mar 07, 2011
Secretary of State

Entity Name: UNITED CONGREGATIONAL INTERNATIONAL CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

4425 SW 44TH STREET
OCALA, FL 34474 US

New Principal Place of Business:

1690 HENRY BLAIR LANE
OCALA, FL 34430 US

Current Mailing Address:

4425 SW 44TH STREET
OCALA, FL 34474 US

New Mailing Address:

135 SE 34TH STREET
OCALA, FL 34471 US

FEI Number: 11-3782666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, ABRAHAM SR
4425 SW 44TH
OCALA, FL 34474 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: P
Name: ROBINSON, ABRAHAM SR
Address: 135 SE 34TH STREET
City-St-Zip: Ocala, FL 344471 US

Title: VP
Name: ROBINSON, ARTHUR L JR
Address: 206 SW WALKER AVE
City-St-Zip: LIVE OAK, FL 32064 US

Title: D
Name: ROBINSON, MAURINA J MRS
Address: 3334 NW 56TH AVE
City-St-Zip: Ocala, FL 34482 US

Title: D
Name: ROBINSON, PATRICIA
Address: 206 SW WALKER
City-St-Zip: LIVE OAK, FL 32064

Title: TR
Name: ROBINSON, ABRAHAM JR
Address: 9298 NORTH MITCHELL
City-St-Zip: CITRUS SPRINGS, FL 33311 US

Title: D
Name: WARD, DAVE
Address: 206 SW WALKER AVE
City-St-Zip: LIVE OAK, FL 32064 US

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: ABRAHAM ROBINSON

PRES

03/07/2011

Electronic Signature of Signing Officer or Director

Date