2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2005 08:00 AM
Secretary of State

DOCUMENT # N07908

1. Entity Name
UNITED CHRISTIAN SERVICES OF DIXIE COUNTY, INC.

Principal Place of Business	Mailing Address
CEDAR STREET P.O. BOX 1486 CROSS CITY, FL 32628	CEDAR STREET P.O. BOX 1486 CROSS CITY, FL 32628

DO NOT WRITE IN THIS SPACE

02122005 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-2495091
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LANGSTON, SUSAN V
106 SE 38 AVE.
P.O. BOX 1346
CROSS CITY, FL 32628

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing *Trust Fund Contribution.* ☐ **$5.00** May Be *Added to Fees*

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MILLS, BETTY NELL
STREET ADDRESS	E BARBERAVE/P O BOX 670
CITY-ST-ZIP	CROSS CITY, FL
TITLE	S
NAME	DUNMAN, MARTHA
STREET ADDRESS	MACARTHUR AVE PO BOX 2152
CITY-ST-ZIP	CROSS CITY, FL 32628
TITLE	V
NAME	ROBSON, REV. BILLY
STREET ADDRESS	KENNETH ST P.O. BOX 811 NA
CITY-ST-ZIP	CROSS CITY, FL
TITLE	T
NAME	OSTEEN, MARTHA JANE
STREET ADDRESS	PO BOX 608,NA
CITY-ST-ZIP	CROSS CITY, FL
TITLE	D
NAME	RIDDICK, DIANA
STREET ADDRESS	P.O. BOX 249
CITY-ST-ZIP	STEINHATCHEE, FL 32359
TITLE	D
NAME	LANGSTON, SUSAN
STREET ADDRESS	P.O. BOX 1346
CITY-ST-ZIP	CROSS CITY, FL 32628

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02/25/05-80045-001 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Martha Jane Osteen Martha Jane Osteen 2-23-05 352-498-3889
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #