

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07908

FILED
Apr 05, 2011
Secretary of State

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

Current Principal Place of Business:

264 NE 210 AVE
CROSS CITY, FL 32628

New Principal Place of Business:

Current Mailing Address:

PO BOX 1486
CROSS CITY, FL 32628

New Mailing Address:

FEI Number: 59-2495091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSTEEN, MARTHA J
491 NE 370 ST
CROSS CITY, FL 32628 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: T
Name: OSTEEN, MARTHA J
Address: POB 608
City-St-Zip: CROSS CITY, FL 32628

Title: S
Name: SCULLY, NEIL
Address: 107 SE 3RD AVENUE
City-St-Zip: CROSS CITY, FL 32628

Title: S
Name: SNELLGROVE, BARBARA JEAN
Address: 155 SE 18TH AVE/POB 841
City-St-Zip: CROSS CITY, FL 32628

Title: D
Name: OSTEEN, MARTHA JANE
Address: PO BOX 608,NA
City-St-Zip: CROSS CITY, FL

Title: P
Name: GEATHERS, JOHNNY
Address: POB 1383
City-St-Zip: CROSS CITY, FL 32628

Title: VP
Name: HODGE, SHARON
Address: 170 SW 5TH ST/POB 124
City-St-Zip: CROSS CITY, FL 32628

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: MARTHA JANE OSTEEN

T

04/05/2011

Electronic Signature of Signing Officer or Director

Date