

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44272

FILED
Mar 05, 2005
Secretary of State

Entity Name: UNITED COMMUNITY CENTERS, INC.

Current Principal Place of Business:

201 13TH AVE WEST
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

P O BOX 1683
BRADENTON, FL 34206

New Mailing Address:

FEI Number: 65-0282384 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GORDON, JAMES O SR
1203 71ST STREET, EAST
RUBONIA, FL 34221 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: DP () Delete
Name: HIERAK, ROBERT
Address: 4215 CALOOSA DR
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: HAYES, RUTHA
Address: 1527 71ST STREET EAST
City-St-Zip: RUBONIA, FL 34221

Title: D () Delete
Name: FREY, DENNI
Address: P.O. BOX 244
City-St-Zip: TERRA CEIA, FL 34250

Title: CS () Delete
Name: STUBBS, SUSAN
Address: 916 8TH STREET EAST
City-St-Zip: BRADENTON, FL 34208

Title: TD () Delete
Name: BURGER, BILL
Address: P.O. BOX 201
City-St-Zip: TERRA CEIA, FL 34250

Title: D () Delete
Name: BACON, ELOUISE
Address: 1109 8TH STREET WEST
City-St-Zip: BRADENTON, FL 34205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MCCAIN, PAUL
Address: 1016 91ST ST. NW
City-St-Zip: BRADENTON, FL 34209

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: GORDON JAMES, SR.

D

03/05/2005

Electronic Signature of Signing Officer or Director

Date