

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005506

FILED
Jan 08, 2007
Secretary of State

Entity Name: NATIONAL CHURCH RESIDENCES OF PALMETTO, FL, INC.

Current Principal Place of Business:

699 HABEN ROAD
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

2335 NORTH BANK DR
COLUMBUS, OH 43220

New Mailing Address:

FEI Number: 31-1390353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 () Delete
Name: RICKETTS, MARK
Address: 2335 N BANK DR
City-St-Zip: COLUMBUS, OH 43220

Title: D () Delete
Name: HUMPHRIES, BARRY
Address: 2335 N BANK DR
City-St-Zip: COLUMBUS, OH 43220

Title: D () Delete
Name: CUNNINGHAM, HERBERT
Address: 235 N BANK DR
City-St-Zip: COLUMBUS, OH 43220

Title: D () Delete
Name: KERBER, STEVEN
Address: 2335 N BANKS DR
City-St-Zip: COLUMBUS, OH 43220

Title: D () Delete
Name: PIERCE, A. KENNETH
Address: 2335 NORTH BANK DR
City-St-Zip: COLUMBUS, OH 43220

Title: VPST () Delete
Name: KASBERG, JOSEPH R
Address: 2335 NORTH BANK DR
City-St-Zip: COLUMBUS, OH 43220

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: ADAMS, RON
Address: 235 N BANK DR
City-St-Zip: COLUMBUS, OH 43220

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 Chapter 119, 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: MARK R. RICKETTS

P

01/08/2007

Electronic Signature of Signing Officer or Director

Date