

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003127

FILED
Mar 03, 2009
Secretary of State

Entity Name: NATURE COAST UNITARIAN UNIVERSALISTS, INC.

Current Principal Place of Business:

7633 N. FLORIDA AVE.
CITRUS SPRINGS, FL 34434

New Principal Place of Business:

Current Mailing Address:

3855 N. GRAPEFERN WAY
C/O WILLIAM CHESS
BEVERLY HILLS, FL 34465

New Mailing Address:

FEI Number: 59-3508824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHESS, WILLIAM B TREAS.
3855 N. GRAPEFERN WAY
BEVERLY HILLS, FL 34465 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: TRES () Delete
Name: CHESS, WILLIAM B
Address: 3855 N. GRAPEFERN WAY
City-St-Zip: BEVERLY HILLS, FL 34465 US

Title: PRES () Delete
Name: COLE, RODNEY PRES
Address: 3410 N. TAMARISK AVE.
City-St-Zip: BEVERLY HILLS, FL 34465 US

Title: VP () Delete
Name: O'CONNELL, RAYMOND
Address: 7 N. MELBOURNE ST.
City-St-Zip: BEVERLY HILLS, FL 35565 US

Title: CLRK () Delete
Name: CURTIS, CAROL
Address: 4930 E. SPRUCE DR.
City-St-Zip: DUNNELLON, FL 34434 US

Title: DIR () Delete
Name: BONNING, JANE
Address: 547 W. HILLWOOD PATH
City-St-Zip: BEVERLY HILLS, FL 34465

Title: DIR () Delete
Name: JONES, ART
Address: 560 NW 14TH PL.
City-St-Zip: CRYSTAL RIVER, FL 34428 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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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 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: WILLIAM B. CHESS

TRES

03/03/2009

Electronic Signature of Signing Officer or Director

Date