2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2006 08:00 AM
Secretary of State

DOCUMENT # N98000003780

1. Entity Name
INTERCOUNTRY ADOPTION CENTER, INC.

Principal Place of Business	Mailing Address
7204 13TH AVENUE WEST BRADENTON, FL 34209	7204 13TH AVENUE WEST BRADENTON, FL 34209

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03062006 No Chg-NP CR2E037 (11/05)

4. FEI Number
65-0863734
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RIPP, MICHELLE A
7204 13TH AVENUE WEST
BRADENTON, FL 34209

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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 Michelle A. Ripp Michelle A Ripp Executive Director 3/6/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RIPP, MICHELLE
STREET ADDRESS	7204 13TH AVE W
CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	SD
NAME	KOELBL, FRANK
STREET ADDRESS	7204 13TH AVE. W
CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	D
NAME	FINLEY, KATHY L
STREET ADDRESS	2661 LOVERS LANE RD.
CITY-ST-ZIP	DODGEVILLE, WI 53533
TITLE	D
NAME	RIPP, MARY
STREET ADDRESS	510 N. WESTFIELD ROAD
CITY-ST-ZIP	MADISON, WI 53719
TITLE	D
NAME	KOELBL, ADAM A
STREET ADDRESS	4909 HOB STREET
CITY-ST-ZIP	MADISON, WI 53716
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/16/06-80045-008 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 trustees empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michelle A. Ripp, Executive Director