


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2005 08:00 AM
Secretary of State


DOCUMENT # N99000007449

1. Entity Name
NATIONAL CHURCH RESIDENCES OF NEW PORT RICHEY, INC.



Principal Place of Business 2335 NORTH BANK DRIVE COLUMBUS, OH 43220	Mailing Address 2335 NORTH BANK DRIVE COLUMBUS, OH 43220
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DO NOT WRITE IN THIS SPACE



01052005 No Chg-NP CR2E037 (10/03)

4. FEI Number 31-1688344	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301

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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 _____ (NOTE: Registered Agent signature required when retesting) DATE _____

Filing Fee is \$61.25
Due by May 1, 2005

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KERBER, STEVEN R 2335 NORTH BANK DR. COLOUMBUS, OH 43220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SLEMMER, THOMAS W 2335 NORTH BANK DRIVE COLUMBUS, OH 43220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIERCE, A. KENNETH 2335 NORTH BANK DRIVE COLUMBUS, OH 43220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NORRIS, MICHELLE 2335 NORTH BANK DR. COLUMBUS, OH 43220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RICKETTS, MARK 2335 NORTH BANK DR COLUMBUS, OH 43220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST KASBERG, JOSEPH R 2335 NORTH BANK DR COLUMBUS, OH 43220

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 02/10/05-80060-022 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Mark R. Ricketts** **1/5/05** **614-451-2151**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #