

**2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000004613

**Entity Name:** CROSIER FATHERS OF ONAMIA, INC.

**Current Principal Place of Business:**

104 CROSIER DRIVE  
ONAMIA, MN 56359

**Current Mailing Address:**

104 CROSIER DRIVE  
PO BOX 500  
ONAMIA, MN 56359 US

**FEI Number:** 41-0705826

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

HINES, CAROL M  
2490 GLOW WOOD COURT  
MIDDLEBURG, FL 32068-4289 US

*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

**Officer/Director Detail :**

Title P  
Name HOLL, REV. KERMIT MO.S.C  
Address 104 CROSIER DR  
City-State-Zip: ONAMIA MN 56359

Title VP  
Name KUNKEL, CHARLES WO.S.C.  
Address 104 CROSIER DRIVE  
City-State-Zip: ONAMIA MN 56359

Title STD  
Name SCHIK, JERRY O.S.C.  
Address 104 CROSIER DRIVE  
City-State-Zip: ONAMIA MN 56359

Title D  
Name BREER, JEFFREY JO.S.C.  
Address 104 CROSIER DRIVE  
City-State-Zip: ONAMIA MN 56359

Title D  
Name BECKER, ALBERT LO.S.C  
Address 104 CROSIER DR  
City-State-Zip: ONAMIA MN 56359

*I hereby 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 all other like empowered.*

**SIGNATURE:** ALBERT BECKER

**DIRECTOR OF  
DEVELOPMENT**

**02/06/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date