

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

DOCUMENT# F12000002483

**Entity Name:** MICHAELS COMMUNITY SERVICES CORPORATION**Current Principal Place of Business:**3 EAST STOW ROAD  
SUITE 100  
MARLTON, NJ 08053**Current Mailing Address:**PO BOX 994  
MARLTON, NJ 08053 US**FEI Number:** 45-3199958**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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/D
Name	O'DONNELL, JOHN J
Address	3 EAST STOW ROAD SUITE 100
City-State-Zip:	MARLTON NJ 08053

Title	S/D
Name	JOHNSON, BRUCE DR.
Address	3 EAST STOW ROAD SUITE 100
City-State-Zip:	MARLTON NJ 08053

Title	T/D
Name	PURCELL, JOSEPH
Address	3 EAST STOW ROAD SUITE 100
City-State-Zip:	MARLTON NJ 08053

Title	D
Name	LEVITT, MICHAEL J
Address	3 EAST STOW ROAD SUITE 100
City-State-Zip:	MARLTON NJ 08053

Title	D
Name	MCBRIDE, MARK
Address	3 EAST STOW ROAD SUITE 100
City-State-Zip:	MARLTON NJ 08053

Title	D
Name	MCCONNON, JOAN
Address	3 EAST STOW ROAD SUITE 100
City-State-Zip:	MARLTON NJ 08053

Title	D
Name	KUBIAK, WALTER M
Address	3 EAST STOW ROAD SUITE 100
City-State-Zip:	MARLTON NJ 08053

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:** MICHAEL J. LEVITT**DIRECTOR****04/30/2013**

Electronic Signature of Signing Officer/Director Detail

Date