CSCL/CD-2000 (05/16)

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS NONPROFIT CORPORATION ANNUAL REPORT

2014



Due Octobe	er 1, 2014	File Or	nline at www.n	nichigan.go	v/fileonlir	ne		
	S10215 Corporation name MICHIGAN ASSOCIATION OF CONSERVATION DISTRICT EMPLOYEES							
Resident agent	name and ma	iling address of the reg	jistered office					
134	ZANNE EE 64 PREST RSHALL M	ON DR STE 120						
The address of	the registered	office						
13464	10 -2 17	I DR STE 120						
If the re	sident agen	no changes from the and/or registered off rector information ha	fice has changed, pr	oceed to Item 1 a	ind do not che	ck this box.	esanct in processional control to the procession of the control to	
1. Mailing addr	ess of registe	red office in Michigan if	f changed (may be a F	P.O. Box)		2. Resident Agent if changed		
3. The address	of the registe	ered office in Michigan i	if changed (a P.O. Bo	x may not be desi	gnated as the a	address of the	registered office)	
4. The purpose	s and genera	nature and kind of bus	siness in which the co	rporation engaged	in during the y	ear covered by	y this report:	
5.		NAME and BUSINES	SS OR RESIDENCE A	ADDRESS				
	President							
If different	Secretary							
than President	Treasurer							
	Director					***************************************		
Required Directors	Director							
	Director							
6. Report	due Octo	ber 1, 2014.		File online at	www mich	igan gov/fi	leonline	
Filing Fee \$20.00.			or mail your comp	oleted report wi		money order payable		
				P.O	oorations Divisi . Box 30767			
					sing, MI 48909 7) 241-6470			
Signature of authorized officer or agent Tit			Title		Date		Phone (Optional)	

If more space is needed additional pages may be included. Do not staple any items to report. This report is required by Section 911, Act 162, Public Acts of 1982, as amended. Failure to file this report may result in the dissolution of the corporation.

DO NOT DETACH THIS STUB

Identification Number: 810215

Corporation Name: MICHIGAN ASSOCIATION OF CONSERVATION DISTRICT EMPLOYEES

CSCL/CD-2000 (05/16)

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS NONPROFIT CORPORATION ANNUAL REPORT

2015



Due Octobe	r 1, <u>201</u>	5 File Online a	at www.mi	chigan.g	ov/fileonlin	ne			
Identification Num 81021	mber Corporation name								
Resident agent na	ame and m	nailing address of the registered	office						
		BRIGHT							
		TON DR STE 120 MI 49068							
The address of th									
	PRESTO HALL MI	N DR STE 120 49068					The control of the co		
If the res	sident age	e no changes from the previou ent and/or registered office has director information has chan	s changed, prod	ceed to Item	1 and do not che	ck this box.			
1. Mailing address of registered office in Michigan if changed (may be a P.O. Box) 2. Resident Agent if changed									
3. The address of	of the regis	stered office in Michigan if chang	jed (a P.O. Box i	may not be de	esignated as the a	ddress of the	registered office)		
4. The purposes	and gener	ral nature and kind of business ir	n which the corp	oration engag	ed in during the y	ear covered by	y this report:		
5.		NAME and BUSINESS OR F	RESIDENCE AD	DRESS					
	President								
If different	Secretary								
than President	Treasurer								
If the corporation is a private foundation or formed to provide care to a dentally underserved population, check the following box. If box is checked the board shall consist of 1 or more directors. The board of all other corporations shall consist of 3 or more directors.									
Required	Director				***************************************		**************************************	*************************************	
Director(s)	Director						,		
	Director								
6. Report d	lue Oc	tober 1, 2015.	F	ile online	at www.michi	igan.gov/fi	leonline		
Filing Fee \$20.00					or mail your completed report with a check or money order payable o the State of Michigan.				
P.O. Lansi					Corporations Division P.O. Box 30767 Lansing, MI 48909 (517) 241-6470				
Signature of au	thorized o	fficer or agent	Title		Date		Phone (Optional)		

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Identification Number: 810215

Corporation Name: MICHIGAN ASSOCIATION OF CONSERVATION DISTRICT EMPLOYEES

CSCL/CD-2000 (05/16)

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS NONPROFIT CORPORATION ANNUAL REPORT

2016



Due Octobe	r 1, 2016	File Online	at www.r	michigan.	gov/fileonli	ne			
	810215 Corporation name MICHIGAN ASSOCIATION OF CONSERVATION DISTRICT EMPLOYEES								
SUZ 1346	ame and mailing a ANNE EBRIGH APRESTON D RSHALL MI 49	DR STE 120	d office						
	ne registered office								
	PRESTON DR HALL MI 4906								
If the res	sident agent and/o	anges from the previo or registered office ha r information has char	is changed, pi	roceed to Item	1 and do not ch	eck this box.	The state of the s		
Mailing addre	ss of registered off	fice in Michigan if chang	jed (may be a	P.O. Box)	NAME OF THE PERSON OF THE PERS	2. Resident Agent if changed			
3. The address	of the registered of	ffice in Michigan if chanç	ged (a P.O. Bo	ox may not be d	lesignated as the	address of the	registered office)		
4. The purposes and general nature and kind of business in which the corporation engaged in during the year covered by this report:									
5.		IE and BUSINESS OR	RESIDENCE	ADDRESS					
	President								
If different	Secretary								
President	Treasurer								
If the corporation is a private foundation or formed to provide care to a dentally underserved population, check the following box. If box is checked the board shall consist of 1 or more directors. The board of all other corporations shall consist of 3 or more directors.									
Required	Director	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Director(s)	Director								
2	Director								
6. Report due October 1, 2016. File online at www.michigan.gov/fileonline									
Filing Fee \$20.00					r mail your completed report with a check or money order payable the State of Michigan.				
				Return to: C	Return to: Corporations Division P.O. Box 30767 Lansing, MI 48909 (517) 241-6470				
Signature of aut	horized officer or	agent	Title		Date		Phone (Optional)		

If more space is needed additional pages may be included. Do not staple any items to report. This report is required by Section 911, Act 162, Public Acts of 1982, as amended. Failure to file this report may result in the dissolution of the corporation.

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Identification Number: 810215

Corporation Name: MICHIGAN ASSOCIATION OF CONSERVATION DISTRICT EMPLOYEES