

2018



Due October 1, 2018 File Online at www.michigan.gov/corpfilingonline

Identification Number 800858586	Corporation name DOWNRIVER COMMUNITY SERVICES INC.
Resident agent name and mailing address of the registered office MICHAEL BARANOWSKI 555 ST CLAIR RIVER DR ALGONAC, MI 48001	
The address of the registered office 555 ST CLAIR RIVER DR ALGONAC, MI 48001	OCT 25 2018 CORPORATIONS DIVISION

RECEIVED
AUG 06 2018
LARA \$20.00

FILED

If no change in the address of the registered office and/or resident agent proceed to Item 4.

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 the registered office in Michigan if changed (a P O Box may not be designated 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 <i>PRIMARY HEALTH CARE AND COMMUNITY SERVICES</i>	
5 NAME and BUSINESS OR RESIDENCE ADDRESS	
	President <i>JOHN HIGHSWORTH, 6330 HOLLAND ROAD, ALGONAC, MI 48001</i>
If different than President	Secretary <i>SHIRLEY HUNTER, 5850 VICTORIA, NEW HAVEN, MI 48048</i>
	Treasurer <i>DAVID MELDRUM, 38311 SARNETTE, CLINTON TWP., MI 48036</i>
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. <input type="checkbox"/>	
Required Director(s)	Director <i>Jon Parsons, 4229 State Rd. Fort Gratiot, MI 48059</i>
	Director <i>Rev. Alan Schwieger, 5067 Pointe Drive, East China, MI 48054</i>
	Director <i>Laurie Huff, 53637 Atherton, New Baltimore, MI 48047</i>
6. Report due October 1, 2018. Filing Fee \$20.00.	
<p>File Online at www.michigan.gov/corpfilingonline or mail your completed report with a check or money order payable to the State of Michigan</p> <p>Return to Corporations Division P O Box 30767 Lansing, MI 48909 (517) 241-6470</p>	
Signature of authorized officer or agent <i>[Signature]</i>	Title <i>CEO</i>
Date <i>07/25/2018</i>	Phone (Optional)