

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 18, 2008  
Secretary of State

DOCUMENT# N94000004893

Entity Name: RIPPY EVANGELISTIC ASSOCIATION, INC.

**Current Principal Place of Business:**

2001 63RD AVENUE NORTH  
SAINT PETERSBURG, FL 33758

**New Principal Place of Business:**

2001 63RD AVENUE NORTH  
SAINT PETERSBURG, FL 33702

**Current Mailing Address:**

2001 63RD AVENUE NORTH  
SAINT PETERSBURG, FL 33702

**New Mailing Address:**

FEI Number: 59-3272654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STERNS, RANDY K  
220 SOUTH FRANKLIN STREET  
TAMPA, FL 33602 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: RIPPY, ARTHELENE  
Address: 2001 63RD AVE. NORTH  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D ( ) Delete  
Name: COFFMAN, MEREDITH  
Address: 11845 BRANCH MOORING  
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete  
Name: PRICE, BURDETTE  
Address: 10483 LONGWOD DRIVE  
City-St-Zip: LARGO, FL 34647

Title: D ( ) Delete  
Name: RIPPY, MICHAEL  
Address: 8507 PLANTATION RIDGE ROAD  
City-St-Zip: MONTGOMERY, AL

Title: D ( ) Delete  
Name: CRABTREE, DAVID  
Address: 30-A TYLER-PRENTICE RD.  
City-St-Zip: WORCESTER, MA 01605

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: CRABTREE, DAVID  
Address: 30-A TYLER PRENTICE ROAD  
City-St-Zip: WORCESTER, MA 01605

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARTHELENE RIPPY

PRES

01/18/2008

Electronic Signature of Signing Officer or Director

Date