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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **723237** (4)

1. Corporation Name  
**RAMONA PARK CHURCH, INC.**

Principal Place of Business Mailing Address  
**U S 41 SOUTH PO BOX 1575 LAKE CITY FL 32056**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **04/21/1972** 3a. Date of Last Report **04/20/1994**  
4. FEI Number **23-7209051** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  **\$68.75 Supplemental Fee Not Required**  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suits, Apt. #, etc. 26 Suits, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip Country 29 Country 30 Country

9. Name and Address of Current Registered Agent  
**ENLOW, ELMER  
U.S. 41 SOUTH, RT. 6, BOX 165-D  
LAKE CITY FL 32055**

10. Name and Address of New Registered Agent  
B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City **FL** B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY - ST - ZIP  
V **DANCY, KERRY  
RT 1 BOX 107, RT 137 S  
WELLBORN FL**  
PD **PETRY, JAMES  
RT 1 BOX 276, RT 252 WEST  
WELLBORN FL**  
S **SMITH, DEAN  
RT 4 BOX 409B-1, RT 90 WEST-JESSUP  
LAKE CITY FL**  
T **KRUMMRICH, JERRY  
RT. 14, BOX 189 SUMMERHILL RD.  
LAKE CITY FL**  
D **CAMPBELL, PAUL  
RT. 4, BOX 390, RT. 90 WEST  
LAKE CITY FL 32055**  
D **JOHNSON, JAMES  
RT 4 BOX 387M, RT 90 W  
LAKE CITY FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  Change  Addition  
P **Dancy, Kerry, 107 Rt 137 S  
Rt 1 Box  
Wellborn Florida 32074**  
2.1 TITLE  Change  Addition  
V **James Johnson JR  
Rt 9 Box 576  
Lake city Florida 32055**  
3.1 TITLE  Change  Addition  
S/D **Paul Campbell  
Rt 4 Box 390 Rt 90 West  
Lake city Florida 32055**  
4.1 TITLE  Change  Addition  
T **Krummrich (same)**  
5.1 TITLE  Change  Addition  
D **Enlow Elmer  
US 41 South Rt 6 Box 165-D  
Lake City Florida 32055**  
6.1 TITLE  Change  Addition  
D **Petry James  
Rt 1 Box 276 Rt 252 West  
Wellborn Florida 32074**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jerry T. Krummrich - Treasurer 3 April 1995 704 758 0530  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #