

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723237

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: RAMONA PARK CHURCH, INC.

**Current Principal Place of Business:**

8170 S US HWY 441  
PO BOX 1575  
LAKE CITY, FL 320561575 US

**New Principal Place of Business:**

8170 S US HWY 441  
LAKE CITY, FL 320561575 US

**Current Mailing Address:**

U S 41 SOUTH  
PO BOX 1575  
LAKE CITY, FL 32056 US

**New Mailing Address:**

FEI Number: 23-7209051      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PETRY, JAMES  
6301 CR252  
WELLBORN, FL 32094 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: PD ( ) Delete  
Name: CAMPBELL, PAUL  
Address: RT 17 BOX 866  
City-St-Zip: LAKE CITY, FL 32055

Title: VP ( ) Delete  
Name: RHODES, DWIGHT  
Address: 3008 TRIBBLE ST  
City-St-Zip: LAKE CITY, FL 32025

Title: SD ( ) Delete  
Name: EASTERLY, JAMES  
Address: 518 W MADISON ST  
City-St-Zip: LAKE CITY, FL 32055

Title: T ( ) Delete  
Name: BEARDSLEY, WILLIAM S  
Address: 533 SW COZY GLN  
City-St-Zip: LAKE CITY, FL 32025

Title: ATD ( ) Delete  
Name: KRUMMRICH, JERRY T  
Address: RT 9 BOX 2218  
City-St-Zip: LAKE CITY, FL 32024

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

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

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

Title: SD (X) Change ( ) Addition  
Name: DINGES, JON M  
Address: 247 NW DOGWOOD TERRACE  
City-St-Zip: LAKE CITY, FL 32055

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

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

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: JON M DINGES

SD

04/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date