

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735099

FILED  
Apr 16, 2009  
Secretary of State

**Entity Name:** SPRING RIDGE FIRST CHURCH OF GOD, INC.

**Current Principal Place of Business:**

5529 NE 52ND PLACE  
SPRING RIDGE SUBDIVISION  
HIGH SPRINGS, FL 32643 US

**New Principal Place of Business:**

**Current Mailing Address:**

5529 NE 52ND PLACE  
SPRING RIDGE SUBDIVISION  
HIGH SPRGS, FL 32643 US

**New Mailing Address:**

**FEI Number:** 59-1874803

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARBER, CARLTON L  
4710 NE 80TH AVE  
HIGH SPRINGS, FL 32643 US

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

RICE, JOSEPH P  
7359 NE CTY. RD. 340  
HIGH SPRINGS, FL 32643 US

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: JOSEPH P. RICE

04/16/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TR ( ) Delete  
Name: RICE, JOE  
Address: 7359 NE CR 340  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: TR ( ) Delete  
Name: BOYETTE, SHELBY  
Address: 7489 NE CR 340  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: TR ( ) Delete  
Name: BROWN, JOE C  
Address: 5779 NE 60TH AVE.  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: TR ( ) Delete  
Name: GRIFFITH, JAMES R  
Address: 5760 NE 51 TERR  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: TR ( ) Delete  
Name: RICHARD, STANLEY  
Address: 7489 NE 33RD WAY  
City-St-Zip: HIGH SPRINGS, FL 32643

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

Title: TR (X) Change ( ) Addition  
Name: DAVIS, DWAYNE L  
Address: PO BOX 481  
City-St-Zip: BELL, FL 32619

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

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

Title: TR (X) Change ( ) Addition  
Name: MARANGONI, ANTHONY  
Address: 5339 NE 58TH TERRACE  
City-St-Zip: HIGH SPRINGS, FL 32643

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: CHERYL A. DAVIS

TREA

04/16/2009

Electronic Signature of Signing Officer or Director

Date