

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT.**

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90034 049 ****61.25

DOCUMENT # N02000003683

1. Entity Name

WEST MARION BAPTIST CHURCH, INC.



Principal Place of Business

6001 NW 135TH AVE.
MORRISTON, FL 32668

Mailing Address

6001 NW 135TH AVE.
MORRISTON, FL 32668

20007426



01112007 No Chg-NP

CR2E037 (4/06)

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4. FEI Number

59-2890435

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RAGSDALE, GEORGE M
6001 NW 135TH AVE.
MORRISTON, FL 32668

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VP
NAME RAGSDALE, GEORGE M
STREET ADDRESS 6001 NW 135TH AVE
CITY-ST-ZIP MORRISTON, FL 32668

TITLE ST
NAME HOFF, ANDREA
STREET ADDRESS 2100 NW 150TH AVE
CITY-ST-ZIP OCALA, FL 34482

TITLE T
NAME BERTRAND, ARMAND
STREET ADDRESS 19291 SE 21ST PL
CITY-ST-ZIP MORRISTON, FL 32668

TITLE T
NAME KAUFFMAN, ERV
STREET ADDRESS 9750 NE 49TH ST
CITY-ST-ZIP BRONSON, FL 32621

TITLE T
NAME JONES, HOWARD
STREET ADDRESS 3417 NW 120TH AVE
CITY-ST-ZIP OCALA, FL 34482

TITLE T
NAME ~~MARSHALL, JOBE~~
STREET ADDRESS ~~950 NW 116TH ST~~
CITY-ST-ZIP ~~OCALA, FL 34482~~

Steve Tipping
4037 NW Blitherton Rd. #90
OCALA, FL 34482

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George M. Ragsdale
RAGSDALE

3/2/07 (352) 812-4658
Date Daytime Phone #