

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000005991

1. Entity Name
**ROGERS COMMUNITY LIFE ENRICHMENT CENTER,
INCORPORATED**



Principal Place of Business
**1100 15TH ST. EAST
BRADENTON, FL 34208**

Mailing Address
**1100 15TH ST. EAST
BRADENTON, FL 34208**



01062005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 57-1179649	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**LAMPKINS, CHERYL
6005 39TH CT. E.
BRADENTON, FL 34203**

**DO NOT WRITE
IN THIS SPACE**

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 *Cheryl Y. Lampkins*

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

(NOTE: Registered Agent signature required when reinstating)

1/26/05

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MEDLIN, BENNIE
STREET ADDRESS	2418 VERMONT AVE. EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	T
NAME	LAMPKINS, CHERYL
STREET ADDRESS	924 SUNRIDGE DR.
CITY-ST-ZIP	SARASOTA, FL 34234
TITLE	V
NAME	THOMPSON, JOSEPH
STREET ADDRESS	106 133RD ST. E
CITY-ST-ZIP	BRADENTON, FL 34212
TITLE	S
NAME	MITCHELL, GLORIA Y
STREET ADDRESS	1613 14TH AVE. EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 *Bennie Medlin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/26/05