

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90028 032 ****70.00

DOCUMENT # N05000010733

1. Entity Name
RIFLE RANGE BAPTIST CHURCH INC.



Principal Place of Business
**156 N. RIFLE RANGE RD.
WINTER HAVEN, FL 33880**

Mailing Address
**156 N. RIFLE RANGE RD.
WINTER HAVEN, FL 33880**

60007193



2. Principal Place of Business
156 N. Rifle Range Rd.
Suite, Apt. #, etc.
N/A

3. Mailing Address
156 N. Rifle Range Rd.
Suite, Apt. #, etc.
N/A

01182006 Chg-NP CR2E037 (11/05)

City & State
Winter Haven, Florida
Zip
33880
Country
USA

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Winter Haven, Florida
Zip
33880
Country
USA

4. FEI Number
03-0558001
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**HERMAN, JERRY M
156 N. RIFLE RANGE RD.,
WINTER HAVEN, FL 33880**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: **P** ☐ Delete
NAME: **HERMAN, JERRY M**
STREET ADDRESS: **156 N. RIFLE RANGE RD.**
CITY-ST-ZIP: **WINTER HAVEN, FL 33880**

TITLE: **D** ☐ Delete
NAME: **CARVER, JIMMY**
STREET ADDRESS: **123 7TH ST. W.**
CITY-ST-ZIP: **WAHNETA, FL 33880**

TITLE: **D** ☐ Delete
NAME: **BAMBERG, GENE**
STREET ADDRESS: **2822 AVE. R. N.W.**
CITY-ST-ZIP: **WINTER HAVEN, FL 33881**

TITLE: **D** ☐ Delete
NAME: **GABLE, HARRY**
STREET ADDRESS: **254 LAKE MCLEOD DR.**
CITY-ST-ZIP: **EAGLE LAKE, FL 33839**

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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: *Jerry M. Herman* **JERRY M. HERMAN** **1-18-06** **(863) 324-3144**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #