

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000004432

**FILED**  
**Jul 09, 2012**  
**Secretary of State**

**Entity Name:** ALPHA RETREAT CATHOLIC MINISTRY, INC.

**Current Principal Place of Business:**

1738 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 326031839

**New Principal Place of Business:**

**Current Mailing Address:**

1738 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 326031839

**New Mailing Address:**

**FEI Number:** 45-2076218

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

B&C CORPORATE SERVICES OF CENTRAL FLORIDA,  
INC.  
390 NORTH ORANGE AVENUE, SUITE 1400  
ORLANDO, FL 32801 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: D  
Name: RUCHINSKI, DAVID  
Address: 1738 WEST UNIVERSITY AVENUE  
City-St-Zip: GAINESVILLE, FL 326031839

Title: D  
Name: SANFORD, GARY  
Address: 580 NORTH AFTERGLOW CIRCLE  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D  
Name: GRABOSKY, DAVE  
Address: 5550 OSPREY ESLE LANE  
City-St-Zip: ORLANDO, FL 32819

I hereby 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 all other like empowered.

SIGNATURE: GARY SANFORD

D

07/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date