

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2006 8:00 am
Secretary of State

03-16-2006 90245 010 ****61.25

DOCUMENT # N25787

1. Entity Name

RICHLAND ASSEMBLY OF GOD, INC.



Principal Place of Business

**8527 OLD LAKELAND HWY
ZEPHYRHILLS FL 33540**

Mailing Address

**8527 OLD LAKELAND HWY
ZEPHYRHILLS FL 33540**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)



4. FEI Number

59-2239278

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STOKES, ROBERT W JR
1521 S. WARREN AVE
LAKELAND FL 33803**

New address

See below -

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 re-electing)

DATE

**FILE NOW: 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **VD**
STREET ADDRESS **HELMS, CHRISTOPHER**
CITY-ST-ZIP **34245 BELT DR**
DADE CITY FL 33523

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP *add zip 33523*

TITLE ☐ Delete
NAME **TD**
STREET ADDRESS **HELMS, JANICE**
CITY-ST-ZIP **34245 BELT DR**
DADE CITY FL 33523

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP *add zip 33523*

TITLE ☐ Delete
NAME **SD**
STREET ADDRESS **BELLAMY, CYNTHIA**
CITY-ST-ZIP **10830 BECKUM RD.**
DADE CITY FL 33525

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

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **STOKES, ROBERT W**
CITY-ST-ZIP **1521 S. WARREN AVE**
LAKELAND FL 33803

TITLE ☒ Change ☐ Addition
NAME *7933 E. Glenridge Loop*
STREET ADDRESS
CITY-ST-ZIP *Lakeland, FL 33809*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
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 Section 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:

Janice M. Helms

3-6-06

352-521-5606