

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # N39144

1. Entity Name
RECOVERY IN CHRIST MINISTRIES, INC.



Principal Place of Business
**300 SHORE DR W
OLDSMAR, FL 34677 US**

Mailing Address
**300 SHORE DRIVE WEST
OLDSMAR, FL 34677 US**



02062006 No Chg-NP

CR2E037 (11/05)

4. FEI Number
59-3018258

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MASSMAN, RICHARD
300 SHORE DR W.
OLDSMAR, FL 34677**

**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

Richard Massman

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-7-06

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SANTOLUCITO, JOSEPH T.
1319 SPAULDING RD
DUNEDIN, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
GREENWALD, ROBERT
1344 BOYLAN AVE
CLEARWATER, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
SKIPPER, STAN
2007 W. DELEON
TAMPA, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
MASSMAN, RICHARD
300 SHORE DR W.
OLDSMAR, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
SANTOLUCITO, JOSEPH
1319 SPAULDING RD
DUNEDIN, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MASSMAN, RICHARD
300 SHORE DR. W.
OLDSMAR, FL**

000000434509
02/25/06-80005-008 61.25

**DO NOT WRITE
IN THIS SPACE**

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:

Richard Massman, Dir. Richard Massman

2-7-06