## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N39114

FILED Jan 06, 2011 Secretary of State

Entity Name: RECOVERY IN CHRIST MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

300 SHORE DR W OLDSMAR, FL 34677 US

Current Mailing Address: New Mailing Address:

300 SHORE DRIVE WEST OLDSMAR, FL 34677 US

FEI Number: 59-3018258 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MASSMAN, RICHARD 300 SHORE DRIVE WEST OLDSMAR, FL 34677 US

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: F

Name: SANTOLUCITO, JOSEPH T.
Address: 1319 SPAUL DING RD
City-St-Zip: DUNEDIN, FL 34698

Title: S

 Name:
 GAINES, TOMMY

 Address:
 10255 SE 179TH PL

 City-St-Zip:
 SUMMERFIELD, FL 34677

Title: VP

Name: MCCOOL, DAN

Address: 300 SHORE DRIVE WEST City-St-Zip: OLDSMAR, FL 34677

Title: DP

Name: MASSMAN, RICHARD Address: 300 SHORE DR W. City-St-Zip: OLDSMAR,, FL 34677

Title:

Name: CRAIG, THOMAS
Address: 1319 SPAULDING RD
City-St-Zip: DUNEDIN, FL 34698

Title:

Name: MASSMAN, RICHARD Address: 300 SHORE DR W. City-St-Zip: OLDSMAR,, FL 34677

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: RICHARD MASSMAN DIR. 01/06/2011

Electronic Signature of Signing Officer or Director

Date