

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 04, 2008 8:00 am
Secretary of State

06-04-2008 90004 046 ****61.25

DOCUMENT # N95000002978

1. Entity Name

VINEYARD CHRISTIAN FELLOWSHIP OF MIDDLEBURG,
FLORIDA, INC.



Principal Place of Business

3114 COUNTY ROAD #220
MIDDLEBURG FL 32068
US

Mailing Address

P O BOX 862
MIDDLEBURG FL 32050
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3451518

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

STEPHANS, RONALD E
2996 SOUTHBANK CIR
GREEN COVE SPRINGS FL 32083

Name

Ronald E Stephens

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

2996 Southbank Cir.

City

Green Cove Springs

FL

Zip Code

32093

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

Ronald E Stephens

Ronald E Stephens

5/26/08

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

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By September 3, 2008

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 PD ☐ Delete
NAME STEPHANS, RONALD E
STREET ADDRESS 2996 SOUTHBANK CIR
CITY-ST-ZIP GREEN COVE SPRINGS FL 33043

TITLE STD ☐ Delete
NAME KELLY, DAVID
STREET ADDRESS 622 FILMORE ST 145-C
CITY-ST-ZIP ORANGE PARK FL 32065

TITLE VD ☐ Delete
NAME STEPHENS, LINDA L
STREET ADDRESS 2996 SOUTHBANK CIR
CITY-ST-ZIP GREEN COVE SPRINGS FL 32043

TITLE D ☐ Delete
NAME LEDFORD, HOMER
STREET ADDRESS 799 ELMWOOD ST
CITY-ST-ZIP ORANGE PARK FL 32065

TITLE D ☒ Delete
NAME GOULD, DILLARD
STREET ADDRESS 2512 FEIT CT
CITY-ST-ZIP ORANGE PARK FL 32065

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

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

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:

Ronald E Stephens *Ronald E Stephens*

5/26/08

(904) 406-2345

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #