

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # N98000003775

1. Entity Name
JUST CHURCH, INC:



Principal Place of Business
**38529 5TH AVENUE
ZEPHYRHILLS, FL 33542**

Mailing Address
**36206 BEGONIA AVE
ZEPHYRHILLS, FL 33541 US**



01292007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3522040

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RINGEISEN, KENNETH A
36206 BEGONIA AVE
ZEPHYRHILLS, FL 33541**

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

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
**P
RINGEISEN, KENNETH A
36206 BEGONIA AVE
ZEPHYRHILLS, FL 33541**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
SOKOL, JOHN
3025 ALLEN RD
ZEPHYRHILLS, FL 33541**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
SLOAN, ALICE
3847 TLL OAK LN
ZEPHYRHILLS, FL 33542**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
RINGEISEN, ROBIN D
36206 BEGONIA AVE
ZEPHYRHILLS, FL 33541**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SMITH, REBECCA
37609 8TH AVE.
ZEPHYRHILLS, FL 33541**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SLOAN, CARLOS
3847 TALL OAK LN
ZEPHYRHILLS, FL 33542**

U00000618957
02/08/07-80052-002 61.25

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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:

Robin D. Ringeisen

01/29/2007 (8135585115)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone