2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711185

Entity Name: RIDGEPOINT CHURCH, INC

Current Principal Place of Business:

100 HATFIELD RD

WINTER HAVEN, FL 33880

Current Mailing Address:

100 HATFIELD RD

WINTER HAVEN, FL 33880

FEI Number: 59-1865485 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEFF, CHRISTOPHER M 100 HATFIELD RD WINTER HAVEN, FL 33880 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: CHRISTOPHER M. NEFF 03/02/2023

Electronic Signature of Registered Agent

Officer/Director Detail:

Title LEAD PASTOR Title **EXECUTIVE PASTOR** GAWLOWICZ, JAMES J. JR. NEFF, CHRISTOPHER M. Name Name 216 COLLEGE GROVE CIR NE 4215 THOMAS WOOD LN Address Address City-State-Zip: WINTER HAVEN FL 33880 WINTER HAVEN FL 33881 City-State-Zip:

Title ELDER, PRESIDENT Title ELDER, TREASURER Name MATHEWS, MICHAEL Name SMITH, JAMISON Address 1327 MIRROR TER NW Address 605 TURNBERRY CT WINTER HAVEN FL 33881 City-State-Zip: City-State-Zip: WINTER HAVEN FL 33884

Title TRUSTEE TRUSTEE Title

Name BUTLER, DENNIS KING. HANK Name

Address 620 BERKLEY POINT DR 4811 CLOVER RD Address

City-State-Zip: AUBURNDALE FL 33823 AUBURNDALE FL 33823 City-State-Zip:

Title **ELDER** Title **VP. TRUSTEE** Name HILL, JOHN LOMBARDI, GARY Name

1801 SIR HENRY'S TRAIL Address Address P.O. BOX 1865

City-State-Zip: LAKELAND FL 33809 City-State-Zip: AUBURNDALE FL 33823

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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.

03/02/2023 SIGNATURE: CHRISTOPHER M. NEFF **EXECUTIVE PASTOR**

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 02, 2023

Secretary of State

5322762793CC

Date

Officer/Director Detail Continued:

Title ELDER

Name CHACON, DOUG

Address 109 ALACHUA DR

City-State-Zip: WINTER HAVEN FL 33884

Title SECRETARY, TRUSTEE

Name LYONS, AMANDA

Address 231 TRAVELERS CREEK DR

City-State-Zip: AUBURNDALE FL 33823

Title TRUSTEE

NameSCHROCK, AUSTINAddress3015 PINEDALE AVECity-State-Zip:LAKELAND FL 33803

Title TRUSTEE

Name WHATLEY, CINDY

Address 177 ALEXANDER ESTATES DR

City-State-Zip: AUBURNDALE FL 33823

Title TRUSTEE

Name PREVATTE, CALEB

Address 1214 35TH ST NW

City-State-Zip: WINTER HAVEN FL 33881