

2024 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

02/15/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title LEAD PASTOR
Name GAWLOWICZ, JAMES J. JR.
Address 216 COLLEGE GROVE CIR NE
City-State-Zip: WINTER HAVEN FL 33881

Title EXECUTIVE PASTOR
Name NEFF, CHRISTOPHER M.
Address 4215 THOMAS WOOD LN
City-State-Zip: WINTER HAVEN FL 33880

Title ELDER, TREASURER
Name SMITH, JAMISON
Address 890 N BUENA VISTA DR
City-State-Zip: LAKE ALFRED FL 33850

Title ELDER, PRESIDENT
Name MATHEWS, MICHAEL
Address 1327 MIRROR TER NW
City-State-Zip: WINTER HAVEN FL 33881

Title TRUSTEE
Name KING, HANK
Address 4811 CLOVER RD
City-State-Zip: AUBURNDALE FL 33823

Title TRUSTEE
Name BUTLER, DENNIS
Address 620 BERKLEY POINT DR
City-State-Zip: AUBURNDALE FL 33823

Title VP, TRUSTEE
Name LOMBARDI, GARY
Address P.O. BOX 1865
City-State-Zip: AUBURNDALE FL 33823

Title ELDER
Name HILL, JOHN
Address 1801 SIR HENRY'S TRAIL
City-State-Zip: LAKELAND FL 33809

Continues on page 2

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: CHRISTOPHER NEFF

EXECUTIVE PASTOR

02/15/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title SECRETARY, TRUSTEE
Name LYONS, AMANDA
Address 231 TRAVELERS CREEK DR
City-State-Zip: AUBURNDALE FL 33823

Title TRUSTEE
Name SCHROCK, AUSTIN
Address 3015 PINEDALE AVE
City-State-Zip: LAKELAND FL 33803