

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000009111

**FILED**  
**Jan 23, 2016**  
**Secretary of State**  
**CC2706695059**

**Entity Name:** RISK TAKERS FOR CHRIST, INC.

**Current Principal Place of Business:**

955 33RD AVENUE SW  
VERO BEACH, FL 32968

**Current Mailing Address:**

POST OFFICE BOX 651421  
VERO BEACH, FL 32965

**FEI Number:** 45-3515230

**Certificate of Status Desired:** Yes

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

GLADING, DALE M  
955 33RD AVENUE SW  
VERO BEACH, FL 32968 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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GLADING, DALE M REV.  
Address        955 33RD AVENUE SW  
City-State-Zip: VERO BEACH FL 32968

Title            VP  
Name            LILLY, LAWRENCE REV.  
Address        14365 SHILOH WAY  
City-State-Zip: LAUREL DE 19947

Title            TRUSTEE  
Name            CUTTING, KEITH  
Address        107 CONGRESS ST  
City-State-Zip: VERO BEACH FL 32966

Title            SECRETARY/TREASURER  
Name            GRIFFIN, THOMAS  
Address        5638 SUNBERRY CIRCLE  
City-State-Zip: FORT PIERCE FL 34951-3112

Title            TRUSTEE  
Name            KENNEDY, THOMAS ESQ.  
Address        1426 21ST STREET  
City-State-Zip: VERO BEACH FL 32960

Title            TRUSTEE  
Name            BATEMAN, CHARLES  
Address        2014 COMMERCE AVENUE  
City-State-Zip: VERO BEACH FL 32960

Title            TRUSTEE  
Name            TROPF, KENNETH  
Address        100 11TH AVENUE  
City-State-Zip: VERO BEACH FL 32962

Title            TRUSTEE  
Name            NAVARRO, STEVEN  
Address        6585 36TH LANE  
City-State-Zip: VERO BEACH FL 32966

**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:** DALE GLADING

**PRESIDENT**

**01/23/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title TRUSTEE  
Name MACE, PAUL REV.  
Address 3035 BUCKINGHAMMOCK TRAIL  
City-State-Zip: VERO BEACH FL 32960