

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24000007440

Entity Name: RUACH COMMUNITY SOLUTIONS, INC.**Current Principal Place of Business:**730 EAST SR 60 W
SUITE 143
LAKE WALES, FL 33853**Current Mailing Address:**364 STERLING DR.
WINTER HAVEN, FL 33884 US**FEI Number: 99-3643236****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GAY, ALONZO T JR
364 STERLING DR.
WINTER HAVEN, FL 33884 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	P
Name	GAY, ALONZO T JR
Address	364 STERLING DR.
City-State-Zip:	WINTER HAVEN FL 33884

Title	VP
Name	GAY, THOMASINA M
Address	364 STERLING DR.
City-State-Zip:	WINTER HAVEN FL 33884

Title	TRUSTEE
Name	GORDON, ZAIRE C
Address	2431 MEADOW LANE
City-State-Zip:	LAKELAND FL 33801

Title	TRUSTEE
Name	GORDON, QAADIR A
Address	1053 EAGLE LAKE LOOP
City-State-Zip:	EAGLE LAKE FL 33839

Title	DIRECTOR, TREASURER
Name	DAVIS, PRESTON E
Address	1632 TAYLOR LANDING DR
City-State-Zip:	BARTOW FL 33830

Title	DIRECTOR
Name	LUCKETT, NEIL A
Address	1904 NORMAN INGRAM AVE.
City-State-Zip:	PLANT CITY FL 33567

Title	SECRETARY
Name	LUCKETT, FRANCINE
Address	1904 NORMAN INGRAM AVE.
City-State-Zip:	PLANT CITY FL 33567

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: ALONZO T. GAY JR**PRESIDENT****04/23/2025**

Electronic Signature of Signing Officer/Director Detail

Date