

FILE NOW: FILING FEE IS \$61.25

FILED

May 05 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 749723 (3)**  
1. Corporation Name  
**SOLID ROCK MINISTRIES, INC.**



Principal Place of Business <b>116 13TH STREET S.E. JASPER FL 32052 US</b>	Mailing Address <b>P.O. BOX 55 JASPER FL 32052 US</b>
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3. Date Incorporated or Qualified <b>11/06/1979</b>		
4. FEI Number <b>59-2003633</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>

2. Principal Place of Business <b>21 511 4th Av. S.E.</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23 Jasper Florida</b>	City & State <b>28</b>
Zip <b>24 32052</b>	Country <b>25 Hamilton</b>
	Zip <b>29</b>
	Country <b>30</b>

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**LEONARD, JAY W  
116 13TH STREET S.E.  
JASPER FL 32052**

10. Name and Address of New Registered Agent

81 Name <b>Jay W. Leonard</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>511 4th Av. S.E.</b>	
83	
84 City <b>Jasper</b>	85 Zip Code <b>FL 32052</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE JAY W. LEONARD, PRESIDENT DATE 4-24-98

Signature typed or printed name of registered agent and title if applicable (Name of Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PO</b>	NAME <b>LEONARD, JAY W.</b>	1.1 TITLE <b>PO</b>	1.2 NAME <b>Jay W. Leonard</b>
STREET ADDRESS <b>116 13TH STREET S.E.</b>	CITY-ST-ZIP <b>JASPER FL</b>	1.3 STREET ADDRESS <b>511 4th Av. S.E.</b>	1.4 CITY-ST-ZIP <b>Jasper, Fl. 32052</b>
TITLE <b>STD</b>	NAME <b>LEONARD, JOAN F.</b>	2.1 TITLE <b>STD</b>	2.2 NAME <b>Joan F. Leonard</b>
STREET ADDRESS <b>116 13TH STREET S.E.</b>	CITY-ST-ZIP <b>JASPER FL</b>	2.3 STREET ADDRESS <b>511 4th Av. S.E.</b>	2.4 CITY-ST-ZIP <b>Jasper, Fl. 32052</b>
TITLE <b>D</b>	NAME <b>VADA, SCOTT</b>	3.1 TITLE	3.2 NAME
STREET ADDRESS <b>5130 BRITTANY DR S # 106</b>	CITY-ST-ZIP <b>ST. PETERSBURG FL</b>	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS	CITY-ST-ZIP	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS	CITY-ST-ZIP	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS	CITY-ST-ZIP	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

Change <input checked="" type="checkbox"/>	Addition <input type="checkbox"/>
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Change <input type="checkbox"/>	Addition <input type="checkbox"/>
Change <input type="checkbox"/>	Addition <input type="checkbox"/>
Change <input type="checkbox"/>	Addition <input type="checkbox"/>

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JAY W. LEONARD, PRESIDENT DATE 4-24-98 904-792-2359

CR2E637 (10/97)