2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

	ANNUAL H	EPORI (AK)			Ma	y 03, 20¢	U4 8:UU	am	
DOCUMENT # 749723 1. Entity Name		AND TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE			Se	cretary -03-2004 90679	of State	e	
SOLID ROCK MINISTRIES, INC.					03	-03-2004 90079	003 01.23		
Principal Place of Business		Mailing Address							
5807 N.W. 47TH COURT JENNINGS FL 32053 US		5807 N.W. 47TH COURT JENNINGS FL 32053 US			94079198				
2. Principal Place of Business 10514 N.W. 36 Drive Suite Apt. #. etc.		3. Mailing Address 10514 N.W. 36 Drive Suite, Apt. #, etc.							
- Calc., , p. 1, c.c.		oute, yet. II, oto.		İ	MOORE CR2E037 (11/03)				
City & State Jasper, Florida		City & State Jasper, Florida		4.	FEI Number	59-2003633	No	pplied For ot Applicable	
32052-	Country Hamilton 6. Name and Address of Current	l	Country Hamilton			Status Desired	\$8.75 Add Fee Require		
	o. Nume and Address of Current	negisteres Agent	Name						
580	NARD, JAY W REV 7 N.W. 47TH COURT				. Jay W. Leonard, Th.G. * (P.O. Box Number is Not Acceptable)				
JEN	ININGS FL 32053	City		10514	9514 N.W. 36 Drive				
Jas							□ 3205	2	
8. The above named entity submits this statement for the purpose or changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees Florida Department of State							State		
TITLE	OFFICERS AND DI	Delete	11.	PD ADD	ITIONS/CHAN	IGES TO OFFICERS A			
NAME STREET ADDRESS CITY - ST - ZIP	LEONARD, JAY W REV 5807 N.W. 47TH COURT JENNINGS FL 32053	C.1 Delete	NAME STREET ADDRESS	Leona 10514	rd, Ja N.W. r, Fl.	y W. Rev. 36 Drive 32052	■ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	STD LEONARD, JOAN F. 5807 N.W. 47TH COURT JENNINGS FL 32053	☐ Delete	NAME		rd, Jo N.W r, Fl.	an F. 36 Drive 32052	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FAZENBAKER, JOANNE L 4684 PANAY DRIVE AKRON OH 44319	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	·			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	☐ Change	☐ Addition	
12. 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 report or supplemental 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 the corporation of the corporation or the receiver of trustee empowered to execute the corporation of the corporation of the corporation or the receiver of trustee empowered to execute the corporation of the corporation									

SIGNATURE

Jay W. Leonard, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(386)792-2603