2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003457

STONE, LAQUINA

ORLANDO, FL 32808

4388 REAL CT

Name: Address:

City-St-Zip:

Apr 25, 2005 Secretary of State

Entity Name: THE ROCK CENTER, INC. **Current Principal Place of Business: New Principal Place of Business:** 4388 REAL CT. ORLANDO, FL 32808 **Current Mailing Address: New Mailing Address:** 4388 REAL CT. ORLANDO, FL 32808 FEI Number: 59-3645945 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STONE, NELSON 4388 RÉAL CT. ORLANDO, FL 32808 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete STONE, NELSON Name: Name: Address: 4388 REAL COURT Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: Title: VD () Delete Title: () Change () Addition STONE, FRANCES Name: Name: Address: 4388 REAL CT. Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: NELSON STONE D 04/25/2005