

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003605

FILED
Apr 05, 2006
Secretary of State

Entity Name: FOUNDATION ON THE ROCK OF PEACE CHURCH, INC.

Current Principal Place of Business:

203 W BAY ST
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

PO BOX 2059
DAVENPORT, FL 33836

New Mailing Address:

FEI Number: 02-0601103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RETAMAR, EDWIN
1623 EVANGELIA DRIVE
DAVENPORT, FL 33837 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: RETAMAR, EDWIN
Address: 1623 EVANGELIA DRIVE
City-St-Zip: DAVENPORT, FL 33837

Title: D () Delete
Name: NEGRON, INES H
Address: 318 MISTERY HOUSE RD
City-St-Zip: DAVENPORT, FL 33837

Title: D () Delete
Name: FLORES, JULIAN
Address: 318 MYSTORY LOUSE ROAD
City-St-Zip: DAVENPORT, FL 33837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: EDWIN RETAMAR

P

04/05/2006

Electronic Signature of Signing Officer or Director

Date