2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008519

FILED Jun 02, 2009 Secretary of State

Entity Name: THE ROCK MINISTRIES, INCORPORATED

Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
857 SE FIF BELLE GL	RST ST ADE, FL 33430			
Current Mailing Address:		New Mailing Address:		
PO BOX 7: BELLE GL	5 ADE, FL 334300075			
In accordan	: 03-0413083 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation di)	
Name and	I Address of Current Registered Agent:	Name and Address of New Registered Agent:		
857 SE FIF	IG, NETTIE RST ST ADE, FL 33430 US			
	named entity submits this statement for the of Florida.	e purpose of changing its registered office or registered agent, or	both,	
SIGNATUF	RE:			
	Electronic Signature of Registered	gent Date		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIREC	CTORS	
Title: Name: Address: City-St-Zip:	T () Delete TEJADA, JAVIER P.O. BOX 294 BELLE GLADE, FL 33430	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	T () Delete HINOJOSA, SILVYA P 841 NE 31ST STREET BELLE GLADE, FL 33430	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	T () Delete POWELL, MICHELLE 12195 BRISBANE LANE WELLINGTON, FL 33415	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	T () Delete PUENTE, JESSIE 8-11 NE 31ST STREET BELLE GLADE, FL 33430	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	T () Delete BROWN, SHIRLEY P.O. BOX 488 SOUTH BAY, FL 33496	Title: () Change () Addition Name: Address: City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify 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: NETTIE TRUTTLING PAST 06/02/2009