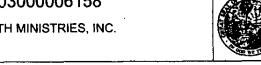
2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # N03000006158 1. Entity Name UPON THIS ROCK FAITH MINISTRIES, INC. Principal Place of Business Mailing Address

FILED Apr 02, 2008 08:00 Al Secretary of State



22205 SW 112 CT **GOULDS, FL 33170** 22205 SW 112 CT GOULDS, FL 33170

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6. Name and Address of Current Registered Agent

03302008 No Chg-NP CR2E037 (4/06)

Applied For 4. FEI Number 06-1700342 Not Applicable \$8,75 Additional

5. Certificate of Status Desired

Fee Required

BLAKE, MARGARET W 22205 SW 112 CT **GOULDS, FL 33170**

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the obligations of registered agent.							
SIGNATURE.	Signature, typed or printed name of registered agent and title	Lapplicable. (NOTE: Registered	Agent signature	, a required when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financ Trust Fund Contribution.	ing 🛘	\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					Unnonconnert		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLAKE, MARGARET W 22205 SW 112 CT GOULDS, FL 33170		•		000000378710 04/14/08-80065-015 70.00		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	V. MCDONALD, CAROLINE R 2035 NW 41 ST MIAMI, FL 33142						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GAMMONS, ALLENE R 19811 SW 119 AVE MIAMI, FL 33177			DO	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GAMMONS, LAWRENCE JR 19811 SW 119 AVE MIAMI, FL 33177	,:		IN	THIS SPACE		
TITLE NAME STREET ADORESS CITY-ST-ZIP	OE WILSON, MORRIS J SR 22205 SW 112 CT GOULDS, FL 33170						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TILGHMAN, BARBARA A 22205 SW 112 CT GOULDS, FL 33170				· · · · · · · · · · · · · · · · · · ·		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							