

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007064

FILED
Apr 29, 2009
Secretary of State

Entity Name: LIVING ROCK MINISTRIES, INC.

Current Principal Place of Business:

2332 EVENGLOW CT
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

2332 EVENGLOW CT
DELTONA, FL 32725

New Mailing Address:

FEI Number: 83-0369083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DANIELS, GWENDOLYN
2332 EVENGLOW CT
DELTONA, FL 32725 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: DANIELS, HENRY PASTOR
Address: 2332 EVENGLOW CT
City-St-Zip: DELTONA, FL 32725

Title: D () Delete
Name: DANIELS, GWENDOLYN PASTOR
Address: 2332 EVENGLOW CT
City-St-Zip: DELTONA, FL 32725

Title: O () Delete
Name: MERRIWEATHER, NATTASHA MRS.
Address: 1416 BROOKSTONE ROAD
City-St-Zip: AUGUSTA, GA 30815

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 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: GWENDOLYN DANIELS

MRS.

04/29/2009

Electronic Signature of Signing Officer or Director

Date