2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006
Secretary of State

DOCUMENT# N04000002415

Entity Name: SOLID ROCK DELIVERANCE EVANGELISTIC CENTER INC.

Current Principal Place of Business:

1610 ELIZABETH STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

1610 ELIZABETH STREET
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 54-2147520 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WASHINGTON, ADRIN
1610 ELIZABETH STREET
JACKSONVILLE, FL 32206 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: WASHINGTON, ADRIN
Address: 1610 ELIZABETH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D ( ) Delete
Name: WASHINGTON, MONIQUE R
Address: 1610 ELIZABETH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: O ( ) Delete
Name: THOMAS, MESHANDRA
Address: 5844 HOLLY HOCK
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WASHINGTON, ADRIN R PASTOR
Address: 1610 ELIZABETH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D (X) Change ( ) Addition
Name: WASHINGTON, MONIQUE R EVANGEL
Address: 1610 ELIZABETH STREET
City-St-Zip: JACKSONVILLE, FL 32206

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: ADRIN WASHINGTON D 03/17/2006

Electronic Signature of Signing Officer or Director — Date