## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000002534

Entity Name: ROCK HOUSE MINISTRIES, INC.

FILED Jan 10, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
4849 POM NEW POR	PANO DR RT RICHEY, FL 34652	US			
Current Mailing Address:			New Mailing Address:		
4849 POMPANO DR NEW PORT RICHEY, FL 34652 US		US			
FEI Number: 20-0984594 FEI Number Applied For ( )		mber Applied For()  FEI	Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
BROWN, 0 4849 POM NEW POR		US			
	named entity submits of Florida.	this statement for the purpos	se of changing it	ts registered office or registered agent, or both,	
SIGNATURE:					
	Electronic Signa	ture of Registered Agent		Date	
OFFICERS	S AND DIRECTORS:		ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ) Delete BROWN, KENNETH E 4849 POMPANO DR. NEW PORT RICHEY, FL	34652 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( ) Delete ROBINSON, JEREMY TEE TIME CIRCLE NEW PORT RICHEY, FL	34654 US	Title: Name: Address: City-St-Zip:	S/T (X) Change ( ) Addition ROBERSON, RANDY 16824 MIDSUMMER LANE SPRING HILL, FL 34610 US	
Title: Name: Address: City-St-Zip:	S/T ( ) Delete SNOW, DAWN 8240 FISHHAWK DR. NEW PORT RICHEY, FL	34653 US	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition SNOW, DAWN 8240 FISHHAWK DR. NEW PORT RICHEY, FL 34653 US	
Title: Name: Address: City-St-Zip:	DIR ( ) Delete BROWN, KENNETH E 4849 POMPANO DR. NEW PORT RICHEY, FL	34652 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DIR ( ) Delete ROBINSON, JEREMY TEE TIME CIRCLE NEW PORT RICHEY, FL	34654 US	Title: Name: Address: City-St-Zip:	DIR (X) Change ( ) Addition ROBERSON, RANDY 16824 MIDSUMMER LANE SPRING HILL, FL 34610 US	
Title: Name: Address: City-St-Zip:	DIR () Delete SNOW, DAWN 8240 FISHHAWK DR. NEW PORT RICHEY, FL	34655 US	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: KENNETH E. BROWN P 01/10/2009