2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011691

Entity Name: ZION'S ROCK MINISTRY INC

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

526 SHADY PINE WAY APT B-1

GREENACRES, FL 33415

Current Mailing Address: New Mailing Address:

526 SHADY PINE WAY APT B-1 GREENACRES, FL 33415

FEI Number: 20-2014998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEWIS, USHAE M 526 SHADY PINE WAY APT B-1 GREENACRES, FL 33415 US

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:

Flacture in Circumstance of Descietance of Accord

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 LEWIS, USHAE M
 Name:

 Address:
 526 SHADY PINE WAY APT B-1
 Address:

 City-St-Zip:
 GREENACRES, FL 33415
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 LEWIS, LINCOLN L
 Name:

 Address:
 526 SHADY PINE WAY APT B-1
 Address:

 City-St-Zip:
 GREENACRES, FL 33415
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 DENNIS, DASHAWN A
 Name:

 Address:
 526 SHADY PINE WAY APT B-1
 Address:

 City-St-Zip:
 GREENACES, FL 33415
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: USHAE LEWIS P 04/29/2005