


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # N18156 1. Entity Name "MY CHURCH UPON THIS ROCK" (INC.)	
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Principal Place of Business %CORTLEY MAE FLETCHER 6253 SW 62 COURT MIAMI, FL 33143	Mailing Address %CORTLEY MAE FLETCHER 6253 SW 62 COURT MIAMI, FL 33143
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DO NOT WRITE IN THIS SPACE



02192007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0273905	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

FLETCHER, CORTLEY MAE
6253 SW 62 COURT
MIAMI, FL 33143

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLETCHER, BISHOP WILLIE 6253 SW 62 COURT MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FLETCHER, CORTLEY MAE 6253 SW 62 COURT MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILCOX, SHARON GRAHAM 6253 SW 62 COURT MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FLETCHER, THERESA ANN 6253 SW 62 COURT MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FLETCHER, PANNEALL 6253 SW 62 CT MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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04/10/07-80055-014 70.00

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.

SIGNATURE: Theresa Fletcher / Theresa Fletcher 3-31-07 305-665-8578
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #