

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18156

**FILED**  
**Mar 20, 2011**  
**Secretary of State**

**Entity Name:** "MY CHURCH UPON THIS ROCK" (INC.)

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 65-0273905

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FLETCHER, CORTLEY MAE  
6253 SW 62 COURT  
MIAMI, FL 33143 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:** PD  
**Name:** FLETCHER, BISHOP WILLIE  
**Address:** 6253 SW 62 COURT F  
**City-St-Zip:** MIAMI, FL

**Title:** VPD  
**Name:** FLETCHER, CORTLEY MAE  
**Address:** 6253 SW 62 COURT F  
**City-St-Zip:** MIAMI, FL

**Title:** SD  
**Name:** WILCOX, SHARON GRAHAM  
**Address:** 6253 SW 62 COURT F  
**City-St-Zip:** MIAMI, FL

**Title:** S  
**Name:** FLETCHER, THERESA ANN  
**Address:** 6253 SW 62 COURT F  
**City-St-Zip:** MIAMI, FL

**Title:** T  
**Name:** FLETCHER, PANNEALL  
**Address:** 6253 SW 62 CT  
**City-St-Zip:** MIAMI, FL 33143

I hereby 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 all other like empowered.

**SIGNATURE:** SHARON GRAHAM WILCOX

SD

03/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date