

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26250

FILED
Apr 17, 2009
Secretary of State

Entity Name: SOLID ROCK CHRISTIAN MINISTRIES CHURCH, INC.

Current Principal Place of Business:

4128 28TH ST N
SAINT PETERSBURG, FL 33714 US

New Principal Place of Business:

Current Mailing Address:

4128 28TH ST N
SAINT PETERSBURG, FL 33714 US

New Mailing Address:

FEI Number: 59-2890359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, GLENN G
4128 28TH STREET NORTH
ST PETERSBURG, FL 33714 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: DP () Delete
Name: MILLER, GLENN G
Address: 1917 KANSAS AVE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: DV () Delete
Name: GILL, JOE REV.
Address: 5270 98TH AVE. NORTH
City-St-Zip: SAINT PETERSBURG, FL 33782

Title: D () Delete
Name: GILL, GLORIA REV.
Address: 5270 98TH AVE. N
City-St-Zip: PINELLAS PARK, FL 33782

Title: DST () Delete
Name: MILLER, RITA
Address: 1917 KANSAS AVE. N.E.
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: ASAT () Delete
Name: DWINELL, LORINNE A
Address: 4000 24TH STREET N
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: ASAT () Delete
Name: GLACKIN, CHRISTINA L
Address: 2812 42ND AVE N.
City-St-Zip: SAINT PETERSBURG, FL 33714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DST (X) Change () Addition
Name: GILL, GLORIA REV.
Address: 5270 98TH AVE. N
City-St-Zip: PINELLAS PARK, FL 33782

Title: D (X) Change () Addition
Name: MILLER, RITA REV.
Address: 1917 KANSAS AVE. N.E.
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: D (X) Change () Addition
Name: MILEY, JAMES W PHD
Address: 24 WHALEN AVE.
City-St-Zip: SICKLERVILLE, NJ 08081

Title: D (X) Change () Addition
Name: MILEY, SYLVIA
Address: 24 WHALEN AVE.
City-St-Zip: SICKLERVILLE, NJ 08081

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: GLENN G. MILLER

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date