## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48553

FILED Mar 08, 2005 Secretary of State

Entity Name: CHURCH OF GOD - ROCK OF SALVATION, INC.

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

1240 CASE RD

LA BELLE, FL 33935 US

Current Mailing Address: New Mailing Address:

1240 CASE RD.

LA BELLE, FL 33935 US

FEI Number: 65-0360294 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:

DE LEON, DAVID
1240 CASE RD
BAEZ, ALMA R PD
1240 CASE RD

LA BELLE, FL 33935 US LA BELLE, FL 33935 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: ALMA R. BAEZ 03/08/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 DE LEON, DAVID,
 Name:
 BAEZ, ALMA R PD

 Address:
 1240 CASE RD
 Address:
 1240 CASE RD

 City-St-Zip:
 LA BELLE, FL 33935
 City-St-Zip:
 LA BELLE, FL 33935

Title: VTD Title: (X) Change ( ) Addition ( ) Delete BAEZ, ALMA R., Name: MARTINEZ, FRANCISCO VTD Name: Address: 1240 CASE RD. Address: P.O. BOX 1413 City-St-Zip: LA BELLE, FL 33935 City-St-Zip: LA BELLE, FL 33975

Title: SD () Delete Title: SD (X) Change () Addition Name: BERNAL, YASMIN Name: PUENTE, AIDA SD

Address: P O BOX 745, 1240 CASE RD APT 2 Address: P O BOX 508

City-St-Zip: LABELLE, FL 33935 City-St-Zip: IMMOKALEE, FL 34143

Title: ( ) Delete Title: TD ( ) Change (X) Addition

 Name:
 Name:
 PUENTE, AIDA TD

 Address:
 Address:
 P.O. BOX 508

 City-St-Zip:
 City-St-Zip:
 IMMOKALEE, FL 34143

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: ALMA R. BAEZ PD 03/08/2005