2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2006
Secretary of State

DOCUMENT# N48553

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

Current Principal Place of Business:

1240 CASE RD
LA BELLE, FL 33935 US

New Principal Place of Business:

Current Mailing Address:

1240 CASE RD.
LA BELLE, FL 33935 US

New Mailing Address:

FEI Number: 65-0360294 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BAEZ, ALMA R PD
1240 CASE RD
LA BELLE, FL 33935 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	( ) Delete
Name:	BAEZ, ALMA R PD	
Address:	1240 CASE RD	
City-St-Zip:	LA BELLE, FL 33935	
Title:	VTD	( ) Delete
Name:	MARTINEZ, FRANCISCO VTD	
Address:	P.O. BOX 1413	
City-St-Zip:	LA BELLE, FL 33975	
Title:	SD	( ) Delete
Name:	PUENTE, AIDA SD	
Address:	P O BOX 508	
City-St-Zip:	IMMOKALEE, FL 34143	
Title:	TD	( ) Delete
Name:	PUENTE, AIDA TD	
Address:	P.O. BOX 508	
City-St-Zip:	IMMOKALEE, FL 34143	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ALMA R BAEZ PD 05/22/2006

Electronic Signature of Signing Officer or Director — Date