2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001595

Entity Name: SOLID ROCK REVIVAL MINISTRIES INC.

Apr 30, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
--	-----------------------------

179 SOUTH AVE

US CENTER HILL,, FL 33514

Current Mailing Address: New Mailing Address:

PO BOX 680729

ORLANDO, FL 328680729

FEI Number: 59-3062362 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:

MILLER, GEORGE 7234 PLEASANT DRIVE ORLANDO, FL 32818

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:

Name:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

() Delete GAINOUS, ANITA 6912 RIVER OAKS DRIVE Address: City-St-Zip: ORLANDO, FL 32818 US

Title: () Delete CUMMINGS, CHRISTOPHER Name: Address: 7234 PLEASANT DRIVE City-St-Zip: ORLANDO, FL 32818

Title: () Delete MILLER, THERESA Name: PO BOX 680729 Address: City-St-Zip: ORLANDO, FL 32868

Title: TR () Delete BONAMY, CHARSTEEN Name: P.O. BOX 555292 Address: City-St-Zip: ORLANDO, FL 32805 US

Title: () Delete HENDERSON, VERNESSA Name: 4615 CLARCONA RD. Address: City-St-Zip: ORLANDO, FL 32818 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition GAINOUS, ANITA TRUSTEE Name: Address: 6912 RIVER OAKS DRIVE City-St-Zip: ORLANDO, FL 32818 US

Title: (X) Change () Addition Name: CUMMINGS, CHRISTOPHER TRUSTEE

Address: 7234 PLEASANT DRIVE City-St-Zip: ORLANDO, FL 32818

Title: (X) Change () Addition Name: MILLER, THERESA TRUSTEE

PO BOX 680729 Address: City-St-Zip: ORLANDO, FL 32868

Title: TR (X) Change () Addition BONAMY, CHARSTEEN TRUSTEE Name: P.O. BOX 555292 Address:

City-St-Zip: ORLANDO, FL 32805 US

Title: (X) Change () Addition HENDERSON, VERNESSA TRUSTEE Name:

4615 CLARCONA RD. Address: City-St-Zip: ORLANDO, FL 32818 US

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: THERESA MILLER TR 04/30/2007