



**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 05, 2007 08:00 AM
Secretary of State

DOCUMENT # N95000002733 1. Entity Name CHRIST THE ROCK M.B. CHURCH, INC.	
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Principal Place of Business 1106S 60TH ST TAMPA, FL 33619 US	Mailing Address 1106 S 69TH ST TAMPA, FL 33619 US
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DO NOT WRITE IN THIS SPACE



07022007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3141268	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**HOBLEY, AARON NATHAN
1106 SOUTH 69TH STREET
TAMPA, FL 33619**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000767013 07/05/07 80007-007 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOBLEY, AARON NATHAN 1106 SOUTH 69TH STREET TAMPA, FL 33619
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HOBLEY, EDNA 1106 SOUTH 69TH STREET TAMPA, FL 33619
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR EVERETT, CAROLINE E 10932 14TH STREET TAMPA, FL 33612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR HOBLEY, JANICE L 10505 NORTH 21ST STREET TAMPA, FL 33612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Aaron N. Hobley **AARON HOBLEY** 6-30-07 (813) 626-5801
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #