2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006
Secretary of State

DOCUMENT# N99000000555

Entity Name: STONE OF HELP MINISTRIES, INC.

Current Principal Place of Business:

8921 N.W. 177TH TER
MIAMI, FL 33018

New Principal Place of Business:

Current Mailing Address:

8921 N. W. 177TH TER.
MIAMI, FL 33018

New Mailing Address:

FEI Number: 65-0891307 **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:

TURNER, ANTHONY J PASTOR
8921 N.W. 177TH TER.
MIAMI, FL 33018 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: O ( ) Delete
Name: MILLER, PATRICIA
Address: 9115 NW LITTLE RIVER DR.
City-St-Zip: MIAMI, FL 33147

Title: O ( ) Delete
Name: TURNER, ANTHONY J JR.
Address: 8921 N.W. 177TH TER.
City-St-Zip: MIAMI, FL 33018

Title: D ( ) Delete
Name: TURNER, ANTHONY J SR.
Address: 2971 NW 83RD TER.
City-St-Zip: MIAMI, FL 33147

Title: S ( ) Delete
Name: TURNER, KATURAH
Address: 2971 NW 83RD TER.
City-St-Zip: MIAMI, FL 33147

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: ANTHONY J. TURNER D 05/03/2006

Electronic Signature of Signing Officer or Director — Date