2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 07, 2005
Secretary of State

DOCUMENT# N99000004190

Entity Name: CAFE ON THE ROCK MINISTRIES, INC.

Current Principal Place of Business:

1 EAST SILVER SPRINGS BOULEVARD
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

1 EAST SILVER SPRINGS BOULEVARD
OCALA, FL 34470

New Mailing Address:

FEI Number: 59-3589320 **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:

PHILLIPS, KATHY
4220 SE 24TH TERR
OCALA, FL 34480 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: D ( ) Delete
Name: WERNER, DAVID J
Address: 1136 SE 18TH AVE
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete
Name: PHILLIPS, KATHY G
Address: 4220 SE 24TH TERRACE
City-St-Zip: OCALA, FL 34480

Title: D ( ) Delete
Name: KERWOOD, MICHELLE
Address: 1 POPLAR TERR
City-St-Zip: OCALA, FL 34480

Title: D ( ) Delete
Name: JAMES, ROBERT
Address: 1 E SILVER SPRINGS BLVD
City-St-Zip: OCALA, FL 34470

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 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: MICHELLE KERWOOD MRS. 09/07/2005

Electronic Signature of Signing Officer or Director — Date