

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004539

FILED
Apr 27, 2007
Secretary of State

Entity Name: UPON THIS ROCK MINISTRIES, INC.

Current Principal Place of Business:

5870 S.W. 59TH STREET
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

8081 NORRIS LAKE RD
SNELLVILLE, FL 30039

New Mailing Address:

FEI Number: 65-0936096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BYNUM, RICKEY
5870 S.W. 59TH STREET
MIAMI, FL 33143 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: BYNUM, RICKEY
Address: 5870 S.W. 59TH STREET
City-St-Zip: MIAMI, FL 33143

Title: TD () Delete
Name: BYNUM, CORA
Address: 10902 SW 161ST ST
City-St-Zip: MIAMI, FL 33157

Title: S () Delete
Name: JOYCE, BLAKEY
Address: 5796 SW 59TH ST.
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: LEE, CARLOS
Address: 5870 SW 59TH ST
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: CASSON, JUSTIN
Address: 200 N. 68TH AVE
City-St-Zip: HOLLYWOOD, FL 33024

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:

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

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: RICKEY BYNUM

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date