

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009226

Entity Name: SOLID ROCK HOUSE OF RHEMA CHURCH INC**Current Principal Place of Business:**1796 SW ERIE STREET
PORT SAINT LUCIE, FL 34953**Current Mailing Address:**1796 SW ERIE STREET
PORT SAINT LUCIE, FL 34953 US**FEI Number:** 45-3460216**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SHANKS, YOLANDE M PHD
1796 SW ERIE STREET
PORT SAINT LUCIE, FL 34953 US*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:** YOLANDE SHANKS

02/04/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name SHANKS, YOLANDE M DR.
Address 1796 SW ERIE STREET
City-State-Zip: PORT SAINT LUCIE FL 34953

Title VP 1
Name DAVIS, ANGELA J
Address 1796 SW ERIE STREET
City-State-Zip: PORT SAINT LUCIE FL 34953

Title EXECUTIVE SECRETARY
Name DAVIS, CHANDREYA S
Address 1796 SW ERIE STREET
City-State-Zip: PORT SAINT LUCIE FL 34953

Title PRESIDENT
Name SHANKS, WENDELL L SR.
Address 1796 SW ERIE STREET
City-State-Zip: PORT SAINT LUCIE FL 34953

Title VP 2
Name DAVIS, ALVIN
Address 1796 SW ERIE STREET
City-State-Zip: PORT SAINT LUCIE FL 34953

Title CFO
Name THOMAS, BRIDGETTE
Address 1796 SW ERIE STREET
City-State-Zip: PORT SAINT LUCIE FL 34953

I hereby 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 all other like empowered.

SIGNATURE: YOLANDE M. SHANKS, DR.

CEO

02/04/2021

Electronic Signature of Signing Officer/Director Detail

Date