

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000027

FILED
Apr 22, 2009
Secretary of State

Entity Name: CITY OF REVELATION MINISTRIES, INC.

Current Principal Place of Business:

2853 BERKSHIRE CIRCLE
KISSIMMEE, FL 34743

New Principal Place of Business:

Current Mailing Address:

2853 BERKSHIRE CIRCLE
KISSIMMEE, FL 34743

New Mailing Address:

FEI Number: 91-1679939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOYCE, RITA H
2853 BERKSHIRE CIRCLE
KISSIMMEE,, FL 34743 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: PRES () Delete
Name: JOYCE, ROBERT H JR
Address: 2853 BERKSHIRE CIRCLE
City-St-Zip: KISSIMMEE, FL 34743

Title: SEC () Delete
Name: BRECHT, DAVID S
Address: 20918 120TH AVE. SE
City-St-Zip: KENT, WA 98031

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: JOYCE, RITA H
Address: 2853 BERKSHIRE CIRCLE
City-St-Zip: KISSIMMEE, FL 34743

Title: SEC (X) Change () Addition
Name: BRECHT, DAVID S
Address: 1507 10TH AVE SE
City-St-Zip: PUYALLUP, WA 98372

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: RITA H. JOYCE

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date