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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 706232

1. Corporation Name

MIAMI REVIVAL CENTER, INC.

Principal Place of Business

1550 NE 172ND PLACE
P.O. BOX 638
CITRA FL 32113

Mailing Address

1550 NE 172ND PLACE
P.O. BOX 638
CITRA FL 32113

176887-90821-24 7



2. Principal Place of Business

21 1550 NE 172ND PLACE

Suite, Apt. #, etc.

22

City & State

23 CITRA FL

Zip Country

24 32113 25 MARION

2a. Mailing Address

26 P.O. BOX 638

Suite, Apt. #, etc.

27

City & State

28 CITRA FL

Zip Country

29 32113 30 MARION

3. Date Incorporated or Qualified

09/30/1963

4. FEI Number

59-6209525

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

INGLE, STANLEY E
1550 NE 172ND PLACE
CITRA FL 32113

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Stanley Ingle

Stanley Ingle

1-18-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD DELETE

NAME FIFE, PEARL
STREET ADDRESS 1550 NE 172ND PL
CITY-ST-ZIP CITRA, FL 00000 32113

TITLE VD DELETE

NAME INGLE, STANLEY E
STREET ADDRESS 1550 NE 172ND PL
CITY-ST-ZIP CITRA, FL 00000 32113

TITLE ~~VD~~ D DELETE

NAME INGLE, CAROLYN
STREET ADDRESS 1550 NE 172 PL
CITY-ST-ZIP CITRA FL 32113

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SEC TREAS Change Addition

1.2 NAME TERRY POSEY, TERRY L.
1.3 STREET ADDRESS 1550 NE 172ND PL
1.4 CITY-ST-ZIP CITRA FL 32113

2.1 TITLE D Change Addition

2.2 NAME CLARK, KATIE M
2.3 STREET ADDRESS 1550 NE 172ND PL
2.4 CITY-ST-ZIP CITRA FL 32113

3.1 TITLE D Change Addition

3.2 NAME GOODMAN, ALFRED
3.3 STREET ADDRESS 1550 NE 172ND PL
3.4 CITY-ST-ZIP CITRA FL 32113

4.1 TITLE D Change Addition

4.2 NAME HINSON, SERALDINE
4.3 STREET ADDRESS 19220 IMMOKALEE RD
4.4 CITY-ST-ZIP NAPLES FL 34120

5.1 TITLE D Change Addition

5.2 NAME HINSON, JOHN R
5.3 STREET ADDRESS 19220 IMMOKALEE RD
5.4 CITY-ST-ZIP NAPLES FL 34120

6.1 TITLE D Change Addition

6.2 NAME JENBE, ARTHUR E.
6.3 STREET ADDRESS 1550 NE 172ND PLACE
6.4 CITY-ST-ZIP CITRA FL 32113

SEE ATTACHED

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Terry Posey* SIGNATURE REQUIRED. TERRY L. POSEY 1/11/99 (352) 595-1905
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/1/98)

176887-9021-24
706232

Attachment to the Nonprofit Corporation Annual Report 1999 for:

Miami Revival Center, Inc. Document # 706232

Additions not listed on report

Title D
Name Sarabia, Irene
Street Address 1550 NE 172nd Place
City-St-Zip Citra, FL 32113

Title D
Name Sarabia, Jesus U.
Street Address 1550 NE 172nd Place
City-St-Zip Citra, FL 32113

Title D
Name Smith, Lloyd Jr
Street Address 1550 NE 172nd Place
City-St-Zip Citra, FL 32113