

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 706232

**FILED**  
**Jan 15, 2012**  
**Secretary of State**

**Entity Name:** MIAMI REVIVAL CENTER, INC.

**Current Principal Place of Business:**

17420 NE 16TH TERRACE  
CITRA, FL 32113 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 638  
CITRA, FL 32113 US

**New Mailing Address:**

**FEI Number:** 59-6209525

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOODMAN, ALFRED  
17420 NE 16TH TERRACE  
CITRA, FL 32113 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: P  
Name: GOODMAN, ALFRED  
Address: 17420 NE 16TH TERRACE  
City-St-Zip: CITRA, FL 32113 US

Title: VP  
Name: INGLE, STANLEY E  
Address: 17420 NE 16TH TERRACE  
City-St-Zip: CITRA, FL 32113 US

Title: D  
Name: INGLE, CAROLYN  
Address: 17420 NE 16TH TERRACE  
City-St-Zip: CITRA, FL 32113 US

Title: S/T  
Name: POSEY, TERRY L  
Address: 17420 NE 16TH TERRACE  
City-St-Zip: CITRA, FL 32113 US

Title: D  
Name: JEHLE, ARTHUR E  
Address: 17420 NE 16TH TERRACE  
City-St-Zip: CITRA, FL 32113 US

Title: D  
Name: HINSON, JOHN R JR  
Address: 19220 IMMOKALEE ROAD  
City-St-Zip: NAPLES, FL 34120 US

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: TERRY L POSEY

S/T

01/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date