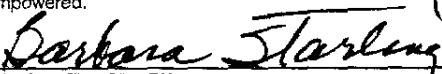


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2004 08:00 AM
Secretary of State

DOCUMENT # 728730 1. Entity Name GOLF VIEW PARK REVIVAL TABERNACLE, INC.					
Principal Place of Business GOLFVIEW PARK REVIVAL TABERNACLE INC P O BOX 1054 LAKE WALES FL 33859-1054 US			Mailing Address % REV. ROBERT HARE P.O. BOX 1054 LAKE WALES FL 33859-1054 US		
2. Principal Place of Business N/A		3. Mailing Address N/A			
Suite, Apt #, etc.		Suite, Apt #, etc.			
City & State		City & State		4. FEI Number 59-1525978	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HARE, ROBERT REV. 3032 CEDAR ST. LAKE WALES FL 33859-8054			7. Name and Address of New Registered Agent Name N/A Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE REV. ROBERT HARE PASTOR (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing))				DATE 02/04/04	
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	HARE, DELORES 3032 CEDAR ST LAKE WALES FL 33898 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	UN00000048530 02/12/04-80083-023 61.25 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRANNEN, RONNIE 143 BOY SCOUT RD. LAKE WALES FL 33898 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BARNETT, ORVAIL 207 BABSON PARK DR BABSON PARK FL 33827 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HARE, KENNETH 3032 CEDAR ST LAKE WALES FL 33898 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HARE, ROBERT REV. 3032 CEDAR ST LAKE WALES FL 33898 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST STARLING, BARBARA 200 PINEY ST LAKE WALES FL 33898 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: BARBARA STARLING 				DATE 02/04/04 863-616-377	