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Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 732336 (3)
1. Corporation Name
REVIVAL U.S.A. FELLOWSHIP, INC.



Principal Place of Business Mailing Address
% ALEXANDRA VIRGINIA & WEST PALM BEACH, FL 420 HIBSCUS STREET, # 103 WEST PALM BEACH FL 33402 US
ATTN: WALTER E. EVANS JR., FOUNDER 4800 DUKE ST. ALEXANDRIA VA 22304-2552 US

3. Date Incorporated or Qualified 04/02/1975 3a. Date of Last Report 02/05/1996

2. Principal Place of Business 2a. Mailing Address
21 P.O. Box # 110 26 P.O. Box # 110
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 W. PALM BEACH, FLA. 28 W. PALM BEACH, FLA.
24 33402 25 PALM BEACH 29 33402 30 PALM BEACH

4. FEI Number 59-1737325 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
NIXON, CHARLES
810 1/2 14TH STREET
WEST PALM BEACH FL 33407

10. Name and Address of New Registered Agent
81 Name Same-NIXON CHARLES
82 Street Address (P.O. Box Number is Not Acceptable) 810 1/2 14th St. #1
83
84 City West Palm Beach, FLA. FL 85 Zip Code 33407

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 Nixon Charles - NIXON CHARLES DATE 2-3-97

12. OFFICERS AND DIRECTORS
TITLE SOUNDER D. EVANS, WALTER E., JR. DELETE
NAME EVANS, WALTER E., JR.
STREET ADDRESS 419 DIMSION AVE.
CITY-ST-ZIP WEST PALM BOH FL
TITLE MOTEN, BERTHA V. DELETE
NAME MOTEN, BERTHA V.
STREET ADDRESS 2210 E. RANDOLPH ST
CITY-ST-ZIP ALEXANDRA VA 22301
TITLE SD DELETE
NAME MOTEN, ALICE
STREET ADDRESS 2210 E. RANDOLPH ST.
CITY-ST-ZIP ALEXANDRA VA 22301
TITLE PRES NIXON CHARLES DELETE
NAME D. NIXON CHARLES
STREET ADDRESS 810 1/2 - 14TH ST. # 1
CITY-ST-ZIP W. Palm Beach, Fla. 33407
TITLE V. PRES MICHAEL S. WHITE DELETE
NAME S. MICHAEL S. WHITE
STREET ADDRESS 7990 - AUDUBON AVE. # 104
CITY-ST-ZIP Alex, VA. 22306
TITLE PRES RUDOLPH MOTEN DELETE
NAME D. RUDOLPH MOTEN
STREET ADDRESS 3708-EDISON ST.
CITY-ST-ZIP Alex, VA. 22301

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE MICHAEL S. WHITE Change Addition
1.2 NAME
1.3 STREET ADDRESS VICE PRES.
1.4 CITY-ST-ZIP NIXON CHARLES Change Addition
2.1 TITLE PRES.
2.2 NAME RUDOLPH MOTEN Change Addition
2.3 STREET ADDRESS TREASURER
2.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: Walter E. Evans, Jr. Founder DATE 2-3-97 561-837-9838

CR2E037 (9/96)