2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT (AR) FILED Mar 03, 2008 08:00 Al Secretary of State **DOCUMENT # 732858** 1. Entity Name **ACTION REVIVAL CENTER INC.** Principal Place of Business Mailing Address 134 WASHINGTON ST. P.O. BOX 1425 LAKE PLACID FL 33852 US LAKE PLACID FL 33852 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apr. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-1984628 Not Applicable Zio Country $Z_{\rm ID}$ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CALLAHAN, MAJOR JR, REV Street Address (P.O. Box Number is Not Acceptable) 112 PARK STRET LAKE PLACID FL 33852 City Z:p 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 lamiliar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or shipted name of registered agent and the Tabble asset CATE (NOTE: Registered Agent signablin industred when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to: \$5.00 May Be Trust Fund Contribution. Due By May 1, 2008 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 VPD TITLE ☐ Change ☐ Addition Delete TITLE CALLAHAN, MILDRED NAME 112 PARK STREET STREET ADDRESS STREET ADDRESS LAKE PLACID FL CITY-ST-ZIP CITY ST-ZIP TITLE ☐ Celate ☐ Change Addition BALENTINA, PATRICA NAME 121 FRANKLIN ST 000000846590 03/18/08-80035-013 61.25 STREET ADDRESS STREET ADDRESS SEBRING FL CITY+ST-7IP CITY-ST-ZIP T:TLE ☐ Delete Change ☐ Addition CALLAHAN, GREG S NAME NAME 120 MORNING STAR STREET ADDRESS STREET ADDPESS LAKE PLACID FL C/TY-ST-7IP CITY - ST - ZiP BILE ☐ Delete . Change TITLE ☐ Addition NAME CALLAHAN, MAJOR REV NA JE 112 PARK ST STREET ADDRESS STREET ADDRESS LAKE PLACID FL 33852 CITY-ST ZIP CITY-ST-ZIP THLE Change ☐ Delete ☐ Addition JORDAN, DONALD NAME WHITING ST. STREET ADDRESS STREET ADDRESS AVON PARK FL CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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 legar 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 at other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PORTAS, ERNEST

109 WASHINGTON ST

LAKE PLACID FL 33852

TITLE

NAME

STREET AUDRESS

CITY-ST-ZIP

- Mrs Jor Callahar

Delete

2-29-08

☐ Change

☐ Addition