

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

**FILED**  
**Sep 03, 2004 8:00 am**  
**Secretary of State**

09-03-2004 90005 006 \*\*\*\*70.00

**DOCUMENT # N00000007484**

1. Entity Name

EVANGILISTIC REVIVAL MINISTRY, INC.



Principal Place of Business

950 6TH STREET WEST  
PALMETTO FL 34221

Mailing Address

PO BOX 726  
PALMETTO FL 34220-0726

44003433



MOORE

CR2E037 (4/04)

2. Principal Place of Business

950 6th Street West  
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 726  
Suite, Apt. #, etc.

City & State

Palmetto, FL

Zip

34221

Country

Manatee

City & State

Palmetto, FL

Zip

34221

Country

Manatee

4. FEI Number

65-0934358

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, JACKIE L SR.  
707 59TH TERRACE EAST  
BRADENTON FL 34203

7. Name and Address of New Registered Agent

Name

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By September 8, 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

TITLE D ☐ Delete  
NAME DAVIS, JACKIE L SR.  
STREET ADDRESS 707 59TH TERRACE E.  
CITY - ST - ZIP BRADENTON FL 34203

TITLE D ☐ Delete  
NAME DAVIS, LEATHEL S  
STREET ADDRESS 707 59TH TERRACE E  
CITY - ST - ZIP BRADENTON FL 34203

TITLE D ☒ Delete  
NAME MURRELL, SHEMEKA L  
STREET ADDRESS 1211 26TH STREET COURT EAST  
CITY - ST - ZIP PALMETTO FL 34221

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☒ Change ☐ Addition  
NAME Thelisa Lashay Miller  
STREET ADDRESS 1565 21st St E, Apt 460  
CITY - ST - ZIP Bradenton, FL 34208

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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: Jackie L Davis Sr.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09-01-04 (941) 752-3498  
Date Daytime Phone #