

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2008 8:00 am
Secretary of State

03-14-2008 90041 015 ****70.00

DOCUMENT # N01000005633

1. Entity Name

REVELATION OF JESUS CHRIST INCORPORATED



Principal Place of Business

14469 SR 100W
LAKE BUTLER FL 32058

Mailing Address

14469 SR 100W
LAKE BUTLER FL 32058



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

82-0560616

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MINCHEW, LEON L JR
525 W BROWN LEE RD
STARKE FL 32091

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

Leon L. Minchew Jr. *Leon L. Minchew Jr.* 3-2-08

FILE NOW: FEE IS \$61.25
Due By: May 1, 2008

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	P	☐ Delete
NAME	MINCHEW, LEON L	
STREET ADDRESS	19444 N.W. 50TH AVENUE	
CITY-ST-ZIP	STARKE FL 32091	
TITLE	D	☒ Delete
NAME	MINCHEW, BETTY F	
STREET ADDRESS	525 W BROWN LEE RD	
CITY-ST-ZIP	STARKE FL 32091	
TITLE	D	☒ Delete
NAME	MCKINNEY, KIMBERLY SUE	
STREET ADDRESS	RT 2 BOX 1570	
CITY-ST-ZIP	STARKE FL 32091	
TITLE	D	☒ Delete
NAME	THORNTON, JANET	
STREET ADDRESS	3978 NW 178 LOOP	
CITY-ST-ZIP	STARKE FL 32091	
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	U.P.	☒ Change ☐ Addition
NAME	Donald Woods, Donald W	
STREET ADDRESS	18826 US Hwy 301 N	
CITY-ST-ZIP	Starke FL 32091	
TITLE	B D	☒ Change ☐ Addition
NAME	Marian D. Crawford	
STREET ADDRESS	1999a SE 8and Path	
CITY-ST-ZIP	Lake Butler, FL - 32051	
TITLE	B D	☒ Change ☐ Addition
NAME	Armanda Woods	
STREET ADDRESS	18826 u.s. Hwy 301 N.	
CITY-ST-ZIP	Starke FL - 32091	
TITLE	B D	☒ Change ☐ Addition
NAME	Justin Rogers	
STREET ADDRESS	18831 NE 11th Terrace	
CITY-ST-ZIP	Lake Butler, FL - 32054	
TITLE	Deacon	☒ Change ☐ Addition
NAME	Randall T Crawford	
STREET ADDRESS	1999a SE 8and Path	
CITY-ST-ZIP	Lake Butler, FL - 32054	

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 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:

Leon L. Minchew Jr. *Leon L. Minchew Jr.* 3-2-08