

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000000171

1. Entity Name
THE SPIRIT OF TRUTH & REVELATION MINISTRIES, INC.



Principal Place of Business
**2800 SW 4TH CT
FT LAUDERDALE, FL 33312**

Mailing Address
**2800 SW 4TH CT
FT LAUDERDALE, FL 33312**



02032005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145**

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IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U00000271791
03/21/05-80062-012 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PHILLIPS, CHANDRA R 2800 SW 4TH CT FT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PHILLIPS, ALEXANDER M 2800 SW 4TH CT FT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT RICKS, CHARLES 2800 SW 4TH CT FT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SHAHEED, NADIRAH 2800 SW 4TH CT FT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: *Chandra R. Phillips*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 12, 2005 (957) 537-0767
Date Daytime Phone #