## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000011628

FILED Jul 26, 2006 Secretary of State

Entity Na	me: REVOLUTION MINISTRIES, INC.	
Current P	rincipal Place of Business:	New Principal Place of Business:
Current M	RECORDANCE WITH S. 607.193(2)(b), F.S., the corporation did not receive and Address of Current Registered Agent:  RRAN, DANIEL MEADOWLARK DRIVE TAMONTE SPRING, FL 32701 US  above named entity submits this statement for the purpose state of Florida.  NATURE:  Electronic Signature of Registered Agent  FICERS AND DIRECTORS:  PTD () Delete e: DANIEL, FARRAN ess: 130 MEADOWLARK DRIVE St-Zip: ALTAMONTE SPRINGS, FL 32701  VD () Delete e: JOHNSON, CASEY ess: 439 WILTON CIRCLE St-Zip: SANFORD, FL 32773  D () Delete e: WILSON, PATRICK ess: 2459 DERBYSHIRE ROAD St-Zip: MAITLAND, FL 32751  D (X) Delete e: NAVERSON, NATHAN ess: 1321 BLACK WILLOW TRAIL St-Zip: ALTAMONTE SPRINGS, FL 32714  VSD (X) Delete	New Mailing Address:
	ce with s. 607.193(2)(b), F.S., the corporation did not	FEI Number Not Applicable (X) Certificate of Status Desired ( ) receive the prior notice.  Name and Address of New Registered Agent:
130 MEAÉ ALTAMON The above	DOWLARK DRIVE ITE SPRING, FL 32701 US  named entity submits this statement for the pu	urpose of changing its registered office or registered agent, or both,
SIGNATU		D.
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	DANIEL, FARRAN 130 MEADOWLARK DRIVE	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	JOHNSON, CASEY 439 WILTON CIRCLE	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	WILSON, PATRICK 2459 DERBYSHIRE ROAD	Title: VSD (X) Change ( ) Addition Name: CHRISTOPHER, PAUL Address: 602 CASA PARK COURT K City-St-Zip: WINTER SPRINGS, FL 32708
Title: Name: Address: City-St-Zip:	NAVERSON, NÁTHAN 1321 BLACK WILLOW TRAIL	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name:	VSD (X) Delete CHRISTOPHER, PAUL	Title: ( ) Change ( ) Addition Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: DANIEL FARRAN PTD 07/26/2006

602 CASA PARK COURT K

WINTER SPRINGS, FL 32708

Address: City-St-Zip: