2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001978

FILED May 10, 2007 Secretary of State

Entity Name: REVIVAL TEMPLE NEW TESTAMENT CHURCH OF GOD, INC.

Current P	Principal Place of Business:	New Principal Place of Business:
	IBROKE RD R, FL 33023	
Current M	Nailing Address:	New Mailing Address:
	IBROKE RD R, FL 33023	
El Number n accordan	r: FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation di	FEI Number Not Applicable (X) Certificate of Status Desired () I not receive the prior notice.
lame and	d Address of Current Registered Agent	d For() FEI Number Not Applicable (X) Certificate of Status Desired() pration did not receive the prior notice.
'861 NW	MAN, SONIA 15 STREET KE PINES, FL 33024 US	
		ne purpose of changing its registered office or registered agent, or bo
	e named entity submits this statement for the of Florida.	ne purpose of changing its registered office or registered agent, or bo
n the Stat	e of Florida.	ne purpose of changing its registered office or registered agent, or bo
the Stat	e of Florida.	
n the Stat	e of Florida.	
n the Stat SIGNATU	RE: Electronic Signature of Registered	Agent Date
n the Stati SIGNATU DFFICER itle: lame: ddress:	e of Florida. RE: Electronic Signature of Registered S AND DIRECTORS: D () Delete PENNERMAN, SONIA 7861 NW 15 STREET	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: () Change () Addition Name: Address:
n the Stati dGNATU DFFICER itle: aame: ddress: ity-St-Zip: itle: aame: ddress:	Electronic Signature of Registered S AND DIRECTORS: D () Delete PENNERMAN, SONIA 7861 NW 15 STREET PEMBROKE PINES, FL 33024 D () Delete PENNERMAN, ELUKIA 7861 NW 15 STREET	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: SONIA PENNERMAN D 05/10/2007