2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002086

Entity Name: REVIVING SOULS MINISTRIES, INC.

FILED Jun 04, 2007 Secretary of State

Littly Name: REVIVING 300E3 WIINISTRIES, INC.			
Current Principal Place of Business:		New Princ	cipal Place of Business:
3824 E LAI COCOA, F	KEVIEW BLVD L 32926		
Current Mailing Address:		New Maili	ng Address:
3824 E LAI COCOA, F	KEVIEW BLVD L 32926		
FEI Number: 20-2485720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
COCOA, F	KEVIEW BLVD L 32926 US named entity submits this statement for the purpose	e of changing	its registered office or registered agent, or both,
SIGNATUR			
SICINATOR	Electronic Signature of Registered Agent		 Date
OFFICERS AND DIRECTORS:		ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	TRUS () Delete FRANKLIN, BERNADINE 410 WINTHROP CIR ROCKLEDGE, FL 32955	Title: Name: Address: City-St-Zip:	D (X) Change () Addition FRANKLIN, BERNADINE 410 WINTHROP CIR ROCKLEDGE, FL 32955
Title: Name: Address: City-St-Zip:	TRUS () Delete LEWIS, JARED 5963 GILSON AVE COCOA, FL 32927	Title: Name: Address: City-St-Zip:	D (X) Change () Addition LEWIS, JARED 5963 GILSON AVE COCOA, FL 32927
Title: Name: Address: City-St-Zip:	TRUS () Delete DEMPS, TRAMESA 3824 E LAKEVIEW BLVD COCOA, FL 32926	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DEMPS, TRAMESA 3824 E LAKEVIEW BLVD COCOA, FL 32926
Title: Name: Address: City-St-Zip:	TRUS () Delete WHITE, TRUSTEE 3824 E LAKEVIEW BLVD. COCOA, FL 32926	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition WHITE, KAMIA 3824 E LAKEVIEW BLVD. COCOA, FL 32926
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition HUBBARD, JOHNNY 3795 KATALINA DR COCOA, FL 32926

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: KAMIA WHITE PD 06/04/2007