

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009856

FILED
Jan 27, 2009
Secretary of State

Entity Name: DIVINE REVELATION INC.

Current Principal Place of Business:

524 DIJON DRIVE
MELBOURNE, FL 32935

New Principal Place of Business:

413 AVENUE B
MELBOURNE BEACH, FL 32935

Current Mailing Address:

524 DIJON DRIVE
MELBOURNE, FL 32935

New Mailing Address:

524 DIJON DRIVE
MELBOURNE, FL 32951

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAXTER, MARY KATHRINE
524 DIJON DRIVE
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

BAXTER, MARY KATHRINE
413 AVENUE B
MELBOURNE BEACH, FL 32951 US

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.

SIGNATURE: ROY S. BAXTER

01/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BAXTER, MARY KATHRINE
Address: 524 DIJON DRIVE
City-St-Zip: MELBOURNE, FL 32935

Title: SEC () Delete
Name: BAXTER, KIMBERLY A
Address: 2602 ST. MICHEL AVE
City-St-Zip: MELBOURNE, FL 32935

Title: VP () Delete
Name: BAXTER, ROY S
Address: 2602 ST. MICHEL AVE
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BAXTER, MARY KATHRINE
Address: 413 AVENUE B
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROY S. BAXTER

VP

01/27/2009

Electronic Signature of Signing Officer or Director

Date