

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000009856

**FILED**  
**Jan 14, 2010**  
**Secretary of State**

**Entity Name:** DIVINE REVELATION INC.

**Current Principal Place of Business:**

413 AVENUE B  
MELBOURNE BEACH, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

524 DIJON DRIVE  
MELBOURNE, FL 32951

**New Mailing Address:**

P.O.BOX121524  
WEST MELBOURNE, FL 32912

**FEI Number:** 01-0842759

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

BAXTER, MARY K DR.  
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: MARY K. BAXTER

01/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BAXTER, MARY K DR.  
Address: 413 AVENUE B  
City-St-Zip: MELBOURNE BEACH, FL 32951

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

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

I hereby 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 all other like empowered.

SIGNATURE: MARY K. BAXTER

PRES

01/14/2010

Electronic Signature of Signing Officer or Director

Date