

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012215

FILED  
Jul 10, 2006  
Secretary of State

**Entity Name:** REVELATION TRUTH CHURCH INTERNATIONAL, INC.

**Current Principal Place of Business:**

10455 134TH COURT  
FELLSMERE, FL 32948

**New Principal Place of Business:**

**Current Mailing Address:**

10455 134TH COURT  
FELLSMERE, FL 32948

**New Mailing Address:**

**FEI Number:** 65-1264646      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

MILLER, KENNETH L  
10455 134TH COURT  
FELLSMERE, FL 32948      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: MILLER, KENNETH  
Address: 10455 134TH COURT  
City-St-Zip: FELLSMERE, FL 32948

Title: STD      ( ) Delete  
Name: MILLER, DONNA M  
Address: 10455 134TH COURT  
City-St-Zip: FELLSMERE, FL 32948

Title: VD      ( ) Delete  
Name: DELGADO, KENNETH W  
Address: 154 ANGELO ROAD SE  
City-St-Zip: PALM BAY, FL 32909

Title: D      ( ) Delete  
Name: DELGADO, BETZABE  
Address: 154 ANGELO ROAD SE  
City-St-Zip: PALM BAY, FL 32909

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: DONNA M MILLER

STD

07/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date