

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001759

FILED
Apr 03, 2007
Secretary of State

Entity Name: REVELATION PENTECOSTAL HOUSE PRAYER FOR ALL NATIONS INC:

Current Principal Place of Business:

5514 EDGE WATER DR.
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

5514 EDGE WATER DR.
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 11-3746172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINDS, VICTOR T
1312 PINE HILL ROAD
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

LIVINGSTON, PATRICIA
5514 EDGEWATER DRIVE
ORLANDO, FL 32810 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: PATRICIA LIVINGSTON

04/03/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HINDS, VICTOR T
Address: 599 HEGEMAN
City-St-Zip: BROOKLYN, NY 11207

Title: VP () Delete
Name: THOMPSON, PATRICIA T
Address: 5514 EDGE WATER DR.
City-St-Zip: ORLANDO, FL 32810

Title: VP (X) Delete
Name: THOMPSON, RICHARD C
Address: 5514 EDGE WATER DR.
City-St-Zip: ORLANDO, FL 32810

Title: SEC () Delete
Name: DONALDSON, MARLENE
Address: 1603 THORNHILL CIRCLE
City-St-Zip: OVIEDO, FL 32765

Title: TRES () Delete
Name: BROWN, KARLENE P
Address: 1085 DIAZ COURT
City-St-Zip: WINTER SPRING, FL 32708

Title: TR (X) Delete
Name: MULLINGS, KAREN
Address: 308 REGAL DOWNS CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LIVINGSTON, PATRICIA
Address: 5514 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: VP (X) Change () Addition
Name: THOMPSON, RICHARD C
Address: 5514 EDGE WATER DR.
City-St-Zip: ORLANDO, FL 32810

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

Title: SEC (X) Change () Addition
Name: POWELL, VIVIENE
Address: 5514 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32810

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: PATRICIA LIVINGSTON

P

04/03/2007

Electronic Signature of Signing Officer or Director

Date