## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000004062

FILED May 21, 2008 Secretary of State

Entity Name: ONE VOICE FOR ETERNAL REVELATION MINISTRIES INC

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	VISTA DR D, FL 32837			
urrent N	lailing Address:	New Mailing Addres	s:	
	VISTA DR D, FL 32837			
n accordan	: 22-3929019 FEI Number Applied For ( ) ice with s. 607.193(2)(b), F.S., the corporation did not		Certificate of Status Desired ( )	
lame and	Address of Current Registered Agent:	Name and Address of	of New Registered Agent:	
IMBLE, E	EVERETT R SR			
	VISTA DR D, FL 32837 US			
RLANDO	VISTA DR	pose of changing its registere	ed office or registered agent, or both	
RLANDO he above the State	VISTA DR D, FL 32837 US e named entity submits this statement for the pue of Florida.  RE:			
PRLANDO The above The State SIGNATUI	VISTA DR D, FL 32837 US e named entity submits this statement for the pue of Florida.  RE:  Electronic Signature of Registered Ager	t .	Date	
The above the State SIGNATUI	VISTA DR D, FL 32837 US e named entity submits this statement for the pue of Florida.  RE:	t .		
PRLANDO The above The Above The State SIGNATUI  PFFICER: title: ame: ddress:	VISTA DR D, FL 32837 US e named entity submits this statement for the pue of Florida.  RE:  Electronic Signature of Registered Ager	t .	Date	
PRLANDO The above The State SIGNATUI	VISTA DR D, FL 32837 US  e named entity submits this statement for the pure of Florida.  RE: Electronic Signature of Registered Ager  S AND DIRECTORS:  P () Delete KIMBLE, EVERETT R SR. 4926 ALAVISTA DR	Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO	

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: EVERETT R. KIMBLE, SR. P 05/21/2008