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(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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11 JUL 28 PM 4:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7/28/11

## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: NEW REVELATION CHRISTIAN CENTER, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: DALE A. RIGGINS

Name (Printed or typed)

50 HINSON CIRCLE

Address

HAVANA, FLORIDA 32333

City, State & Zip

850-339-0951

313 North Davis Street  
Phone number

riggins97@yahoo.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: **New Revelation Christian Center, INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
313 North Main Street  
Havana, Florida 32333

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**To teach the gospel further the cause of the Kingdom of God in the United States and on foreign lands.**

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:

The church has no voting membership. Spiritual decisions affecting the life of the local body of the church are under the care of the Board of Directors.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: **Dale A. Riggins, Pastor**  
Address: **50 Hinson Circle**  
**Havana, Florida 32333**

Name and Title: **Ranae Arnette**  
Address: **905 Conyers Street**  
**Havana, Florida 32333**

Name and Title: **Sandra Riggins, Associate Pastor**  
Address: **50 Hinson Circle**  
**Havana, Florida 32333**

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: **Brenda Brown, Secretary**  
Address: **8491 Southern Park Drive**  
**Tallahassee, Florida 32305**

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: **Dale A. Riggins**  
Address: **50 Hinson Circle**  
**Havana, Florida 32333**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **Dale A. Riggins**  
Address: **313 North Main Street**  
**Havana, Florida 32333**

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Dale A. Riggins  
Required Signature of Registered Agent

7/28/11  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Dale A. Riggins  
Required Signature of Incorporator

7/28/11  
Date

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