2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006
Secretary of State

DOCUMENT# N48688

Entity Name: REVIVAL TEMPLE, INC.

Current Principal Place of Business:

4057 GALLAGHER LOOP
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

4057 GALLAGHER LOOP
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-8122268 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

BURNS, BETTIE JONES
4057 GALLAGNER LOOP
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

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: BURNS, JONES B
Address: 4057 GALLAGHER LOOP
City-St-Zip: CASSELBERRY, FL 32707

Title: VD ( ) Delete
Name: NEWTON, PATRECA D
Address: 1873 TIGERWOOD COURT
City-St-Zip: ORLANDO, FL 32818

Title: TD ( ) Delete
Name: INGS, DANIEL
Address: 1214 CONLEY ST
City-St-Zip: ORLANDO, FL 32805

Title: SD ( ) Delete
Name: BURNS, ANTHONY
Address: 4257 GALLAGHER LOOP
City-St-Zip: CASSELBERRY, FL 32707

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: BETTIE JONES BURNS PD 05/02/2006

Electronic Signature of Signing Officer or Director — Date