2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2006
Secretary of State

DOCUMENT# N93000003865

Entity Name: REVELATION CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

205 NE 87TH ST
MIAMI, FL 33138 US

New Principal Place of Business:

6501 N. MIAMI AVE
SUITE #3
MIAMI, FL 33150 US

Current Mailing Address:

821 N.W. 104TH STREET
MIAMI, FL 33150

New Mailing Address:

FEI Number: 65-0446414 **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:

REID, JOYCE
821 NW 104TH STREET
MIAMI, FL 33150 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: D ( ) Delete
Name: REID, JOYCE
Address: 821 NW 104 ST.
City-St-Zip: MIAMI, FL

Title: P ( ) Delete
Name: DAY, CELIA
Address: 823 NW 104 ST
City-St-Zip: MIAMI, FL 33150

Title: SD (X) Delete
Name: HICKS, SADIE
Address: 2130 NW 100 ST
City-St-Zip: MIAMI, FL 33147

Title: TD (X) Delete
Name: MACHANIC, AMOS
Address: 10720 S.W. 166 ST.
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: DAY, JOHNNY
Address: 823 N.W. 104 ST
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: REID, JOYCE
Address: 821 NW 104 ST.
City-St-Zip: MIAMI, FL

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: SD (X) Change ( ) Addition
Name: DAY, JOHNNY
Address: 1321 NW 111 STREET
City-St-Zip: MIAMI, FL 33150

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: JOYCE R. REID D 09/13/2006
Electronic Signature of Signing Officer or Director — Date