

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004080

FILED
Aug 25, 2009
Secretary of State

Entity Name: REVIVAL MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

3738 RIVER INTL DR
TAMPA, FL 33610 US

New Principal Place of Business:

3738 RIVER INTERNATIONAL DR
TAMPA, FL 33610 US

Current Mailing Address:

P.O. BOX 292888
TAMPA, FL 33687 US

New Mailing Address:

FEI Number: 59-3273513 **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:

Name and Address of New Registered Agent:

HOWARD-BROWNE, RODNEY M DR.
16057 TAMPA PALMS BLVD. W. SUITE 209
TAMPA, FL 33647 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOWARD-BROWNE, RODNEY DR
Address: 16057 TAMPA PALMS BLVD W. #209
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: HOWARD-BROWNE, ADONICA
Address: 16057 TAMPA PALMS BLVD W. #209
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: NICHOLS, ROBERT B REV
Address: 1600 W. 5TH ST
City-St-Zip: FORT WORTH, TX 76102

Title: D () Delete
Name: SPITSBERGEN, MARK
Address: C/O GENEVA NECAISE-1811 RAYMOND AVE #4
City-St-Zip: RAMONA, CA 92065

Title: D () Delete
Name: KELLY, RON
Address: 112139 N 1050 RD
City-St-Zip: MACOMB, IL 61455

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:

Title: MR (X) Change () Addition
Name: WILLIS, SCOTT
Address: 5372 COTTAGE VIEW CT
City-St-Zip: LIBERTY TOWNSHIP, OH 45011

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: TIFFANY LEDUC

MRS

08/25/2009

Electronic Signature of Signing Officer or Director

Date