

FILE NOW: FILING FEE IS \$61.25

FILED
Jun 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000003118 (5)**

1. Corporation Name

REVIVING THE GENERATION, INC.



Principal Place of Business	Mailing Address
5325 EDGEWATER DR STE 4 ORLANDO FL 32810 US	1953 BURBERRY ST APOPKA FL 32703-3623 US

3. Date Incorporated or Qualified 06/28/1995	3a. Date of Last Report 04/17/1996
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2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
Country	Zip
29	30

4. FEI Number 59-3321955	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	
HODGES, GEORGE 111 WEST MAGNOLIA AVENUE SUITE 107 LONGWOOD FL 32750	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SARMIENTO, CARLOS A	1.2 NAME	SARMIENTO, CARLOS A
STREET ADDRESS	1288 CHERRYBARK ROAD	1.3 STREET ADDRESS	1953 BURBERRY ST
CITY-ST-ZIP	APOPKA FL 32703	1.4 CITY-ST-ZIP	APOPKA FL 32703
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLE, KATHY	2.2 NAME	WILLE, KATHY
STREET ADDRESS	PO BOX 3080	2.3 STREET ADDRESS	6630 N.O.B.T.
CITY-ST-ZIP	APOPKA FL	2.4 CITY-ST-ZIP	ORLANDO, FL 32810
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEORGE, SCOTT A	3.2 NAME	
STREET ADDRESS	3110 HOWELL BRANCH ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	EMILY SARMIENTO
STREET ADDRESS		4.3 STREET ADDRESS	1953 BURBERRY ST.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	APOPKA, FL 32703
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, upon an attachment with an address.

SIGNATURE _____

CR2E037 (9/96)