

**2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Dec 09, 2005  
Secretary of State**

DOCUMENT# N99000003230

Entity Name: REVIVAL GENERATION MINISTRIES, INCORPORATED

**Current Principal Place of Business:**

3404 WILDERNESS CIRCLE  
MIDDLEBURG, FL 32068

**New Principal Place of Business:**

3404 WILDERNESS CIRCLE  
MIDDLEBURG, FL 32068

**Current Mailing Address:**

5626 FIAT LANE  
MIDDLEBURG, FL 32068

**New Mailing Address:**

FEI Number: 59-3579098      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:**

BERRY, JOSHUA D  
3404 WILDERNESS CIRCLE  
MIDDLEBURG, FL 32068      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: JOSHUA D. BERRY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BERRY, JOSHUA D  
Address: 5626 FIAT LANE  
City-St-Zip: JACKSONVILLE, FL 32244

Title: VDT ( ) Delete  
Name: BERRY, JENNIFER L  
Address: 5626 FIAT LANE  
City-St-Zip: JACKSONVILLE, FL 32244

Title: SD ( ) Delete  
Name: EURE, DAVID  
Address: 817 BUGLE BRANCH WAY  
City-St-Zip: JACKSONVILLE, FL 32259

Title: D ( ) Delete  
Name: LUCAS, RICHARD  
Address: 14120 SW 78TH AVE  
City-St-Zip: MIAMI, FL 33158

Title: D ( ) Delete  
Name: LUCAS, BONNIE  
Address: 14120 SW 78TH AVE  
City-St-Zip: MIAMI, FL 33158

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BERRY, JOSHUA D  
Address: 3404 WILDERNESS CIRCLE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: VDT (X) Change ( ) Addition  
Name: BERRY, JENNIFER L  
Address: 3404 WILDERNESS CIRCLE  
City-St-Zip: MIDDLEBURG, FL 32068

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 Section 119.07(3)(i), 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: JOSHUA D. BERRY

PD

12/09/2005

Electronic Signature of Signing Officer or Director

Date