## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P0100000930

Entity Name: CITY OF REVELATION, INC.

FILED Apr 23, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2853 BERKSHIRE CIRCLE KISSIMMEE, FL 34743 **Current Mailing Address: New Mailing Address:** 2853 BERKSHIRE CIRCLE KISSIMMEE, FL 34743 US FEI Number: 59-3699010 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOYCE, ROBERT H JR JOYCE, RITA H 2853 BÉRKSHIRE CIRCLE 2853 BÉRKSHIRE CIRCLE KISSIMMEE, FL 34743 KISSIMMEE, FL 34743 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: RITA H. JOYCE 04/23/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS ( ) Delete Title: **PRFS** (X) Change ( ) Addition JOYCE, ROBERT H JR Name: Name: JOYCE, RITA H 2853 BERKSHIRE CIRCLE 2853 BERKSHIRE CIRCLE Address: Address: City-St-Zip: KISSIMMEE, FL 34743 US City-St-Zip: KISSIMMEE, FL 34743 US VΡ Title: Title: (X) Delete () Change () Addition Name: JOYCE, RITA H Name: 2853 BERKSHIRE CIRCLE Address: Address: KISSIMMEE, FL 34743 US City-St-Zip: City-St-Zip: Title: Title: DIR () Delete () Change () Addition MURRAY, CHARLES L Name: Name: 2260-D N. INDIAN CANYON DR. Address: Address: City-St-Zip: PALM SPRINGS, CA 92262 US City-St-Zip: Title: DIR () Delete Title: () Change () Addition MURRAY, HERMINA S Name: Name: Address: 2260-D N. INDIAN CANYON DR. Address: City-St-Zip: PALM SPRINGS, CA 92262 US City-St-Zip: Title: DIR Title: ( ) Delete () Change () Addition BRECHT, DAVID S Name: Name: 20918 120TH AV SE Address: Address: City-St-Zip: KENT, WA 98031 US City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RITA H. JOYCE PRES 04/23/2008