

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003561

Entity Name: NEW REVELATION FULL GOSPEL TEMPLE INC**Current Principal Place of Business:**1469 N MAGNOLIA AVE
OCALA, FL 34472**Current Mailing Address:**P. O. BOX 922429
NORCROSS, GA 30010 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WHITE, CAROLYN E,
1469 N MAGNOLIA AVE
OCALA, FL 34472 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:** CAROLYN E. WHITE

05/01/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name WHITE, LEON SR
Address 7169 HEMLOCK LOOP
City-State-Zip: Ocala FL 34472

Title DIRECTOR
Name WHITE, CAROLYN E
Address 7169 HEMLOCK LOOP
City-State-Zip: Ocala FL 34472

Title TREASURER
Name WHITE-FORD, TIERRA BOUNIQUE
Address 378 MARION OAKS TRL
City-State-Zip: Ocala FL 34473

Title PRESIDENT
Name FRANKLIN, BRENNARD RASHARD
Address 4000 SPRING LANE
UNIT F
City-State-Zip: NORCROSS GA 30092

Title VP
Name SAILOR, ELISHA L.
Address 4000 SPRING LANE
UNIT F
City-State-Zip: NORCROSS GA 30092

Title CFO
Name WORTHEY, LASABRE L.
Address 4000 SPRING LANE
UNIT F
City-State-Zip: NORCROSS GA 30092

Title SECRETARY
Name HUDSON, LA'VORAH R.
Address 4000 SPRING LANE
UNIT F
City-State-Zip: NORCROSS GA 30092

Title SECRETARY, /OCALA
Name LAMOTHE, CHERMAINE JOVELLE
Address 7169 HEMLOCK LOOP
City-State-Zip: Ocala FL 34472

I hereby 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 all other like empowered.

SIGNATURE: LA'VORAH HUDSON**SECRETARY**

05/01/2022

Electronic Signature of Signing Officer/Director Detail

Date