

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000000279

**FILED**  
**Apr 22, 2014**  
**Secretary of State**  
**CC8733873748**

**Entity Name:** REVIVAL LIFE MINISTRIES, INC.

**Current Principal Place of Business:**

718 SWAYING PINE WAY  
DELAND, FL 32724

**Current Mailing Address:**

718 SWAYING PINE WAY  
DELAND, FL 32724

**FEI Number: 26-4038480**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

RADFORD, JOSHUA  
718 SWAYING PINE WAY  
DELAND, FL 32724 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

**Officer/Director Detail :**

Title P  
Name RADFORD, JOSHUA  
Address 718 SWAYING PINE WAY  
City-State-Zip: DELAND FL 32724

Title T  
Name RADFORD, LORI  
Address 718 SWAYING PINE WAY  
City-State-Zip: DELAND FL 32724

Title S  
Name HIGHTSHOE, JAMES  
Address 1501 FOX HILL PLACE  
City-State-Zip: VALRICO FL 33596

Title D  
Name MONTANO, FERMIN M  
Address 17451 LAKERIDGE DR.  
City-State-Zip: CANYON TX 79015

Title D  
Name HILL, JOHN C  
Address 10623 SHELLY RD.  
City-State-Zip: GENTRY AR 72734

*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: JOSHUA RADFORD**

**PRESIDENT**

**04/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date