

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741434

FILED
Mar 22, 2013
Secretary of State
CC0528308989

Entity Name: FAITH HEALING REVIVAL CENTER INC.

Current Principal Place of Business:

FAITH HEALING REVIVAL CENTER INC.
2008 NE 899 ST
OLD TOWN, FL 32680

Current Mailing Address:

2008 N E 899 ST
OLD TOWN, FL 32680 US

FEI Number: 59-1855977

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CARPENTER, THERESA V
2008 NE 899 ST
OLD TOWN, FL 32680 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 CARPENTER, THERESA V
Address 2008 N E 899 ST
City-State-Zip: OLD TOWN FL 32680

Title SEC
Name CARPENTER, JULIAN
Address 2008 N.E. 899 ST.
City-State-Zip: OLD TOWN FL 32680

Title D
Name GROOMS, THERESA L
Address 1320 SWILLEY RD
City-State-Zip: PLANT CITY FL 33567

Title D
Name MCALLISTER, ROBERT J
Address 301 N.E. 516 AVE.
City-State-Zip: OLD TOWN FL 32680

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: JULIAN CARPENTER

SECRETARY

03/22/2013

Electronic Signature of Signing Officer/Director Detail

Date