

Tennessee Secretary of State  
Tre Hargett



Division of Business and Charitable Organizations  
312 Rosa L. Parks Avenue, 6th Floor  
Nashville, Tennessee 37243-1102

September 06, 2023

Mrs. BRENDA HUMPHREY  
P.O. BOX 2281  
ANTIOCH, TN 37011 USA

**RE:** Registration to Solicit Funds for Charitable Purposes  
Organization Name: BLESSED REVELATIONS  
CO Number: CO16224  
Renewal Date: 06/30/2024

Dear Mrs. BRENDA HUMPHREY :

Pursuant to the Tennessee Charitable Solicitations Act, T.C.A. § 48-101-501, *et seq.* the Tennessee Secretary of State has reviewed your application and is pleased to announce your organization's registration to solicit contributions has been **approved**.

The organization must maintain statutory compliance by submitting a renewal application and required fees on an annual basis. At that time you may be required to submit tax filings, financial statements, proof of IRS status, and other documents related to your organization and its fundraising activities. You can find additional information and submit additional filings online at <https://sos.tn.gov/charities>. The "CO" Number listed above will serve as your organization's charitable registration number and should be used when submitting any charitable filings or correspondence.

Please also be advised that if the organization's application or other provided information includes false, misleading or deceptive statements, appropriate action will be taken. Pursuant to the Tennessee Charitable Solicitations Act, a civil penalty of up to five thousand dollars (\$5,000.00) may be assessed for any violation.

Thank you for registering your organization and please do not hesitate to contact us with any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Tre Hargett", written over a horizontal line.

Tre Hargett  
Secretary of State

Tracking Number  
2023125744

## Application to Renew Registration of a Charitable Organization



Tre Hargett  
Secretary of State

### Division of Business and Charitable Organizations Department of State

State of Tennessee  
312 Rosa L. Parks Avenue, 6th Floor  
Nashville, Tennessee 37243  
Phone: 615-741-2555  
Fax: 615-253-5173  
sos.tn.gov/charities

CO Number: CO16224  
Filed: 09/06/2023 10:34 AM  
Tre Hargett  
Secretary of State

## Organization Information

**Legal Name of the Charitable Organization:** BLESSED REVELATIONS

**Legal entity type of the Organization:** Corporation

**Business Services Control Number:** 000588095

**FEIN:** 26-3355693

**Initial Registration Date:** 02/11/2011

**Renewal Date:** 06/30/2023

**Has your fiscal year ending month changed since your last renewal?**

☐ Yes ☒ No

**Fiscal Year Ending Month:** December

**When and where was the organization legally established**

**Date:** 10/09/2008

**Country:** USA

**City/State:** ANTIOCH, TN

**Has your Principal Office address changed since your last renewal?**

☐ Yes ☒ No

**Principal Office Address**

5440 HICKORY WOODS DRIVE  
USA, ANTIOCH, TN 37013

**Has your Mailing address changed since your last renewal?**

☒ Yes ☐ No

**Amended Mailing Office Address**

P.O. BOX 2281  
ANTIOCH, TN 37011, USA

### Contact Information for the Charitable Organization

**Contact Name:** Mrs. BRENDA HUMPHREY

**Telephone Number:** (615) 631-0950

**Fax Number:** (615) 501-0559

**Email:** humphreb07@yahoo.com

**Website:** theblessedrevelations.com

### Current names used by the charity organization

**Do you need to modify other names that the charity solicits under?**

☐ Yes ☒ No

**Has the organization registered in any other state(s)?**

☐ Yes ☒ No

**Does the charity have other offices, chapters, branches, affiliates or a parent?**

☐ Yes ☒ No

**The category that best describes your organization**

L - Housing, Shelter

**The charitable purpose of the organization**

Blessed Revelations is a non-profit organization that aims to provide comprehensive support and assistance to homeless mothers and children who are face life challenging circumstances. Our services are designed to address the physical, emotional, educational, and vocational needs of our clients, with the ultimate goal of helping them achieve stability and self-sufficiency.

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**Tax & Financial Information**

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**Has your tax exempt status changed since your last renewal?**☐ Yes ☒ No**Last Fiscal Year Start:** January 2022**Last Fiscal Year End:** December 2022**Type of 990 Tax Form Filed:** 990-N (ePostcard)**Gross Revenue**

Direct and Indirect Public Contributions	\$ 3,445.30
Government Grants	\$ 0.00
Special Events and Activities	\$ 2,104.66
Membership Dues	\$ 300.00
Other Revenue	\$ 90.51
<b>Total Revenue</b>	<b>\$ 5,940.47</b>

**Expenses**

Total Program Expenses	\$ 852.90
Management and General Expenses	\$ 20.00
Fundraising Expenses	\$ 0.00
Other Expenses	\$ 0.00
<b>Total Expenses</b>	<b>\$ 872.90</b>

<b>Excess/Deficit For the Year (Total Revenue - Total Expenses)</b>	<b>\$ 5,067.57</b>
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**Solicitation Information**

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**Have you been enjoined by any court from soliciting contributions?**☐ Yes ☒ No**Does your organization contract with or otherwise engage the services of any outside fundraising professional (such as a "professional fund-raiser," "paid solicitor," "fund raising counsel," or "commercial co-venturer")?**☐ Yes ☒ No

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**Officer Information**

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**Do you need to modify the current officers?**☒ Yes ☐ No

**List each officer, director, and trustee (at least 2 officers are required, and you must list officers who have or share the following titles: "Chief Financial Officer", "Custodian of Contributions", "Custodian of Final Distributions")**

Mrs. Brenda Humphrey  
5440 Hickory Woods Drive  
Antioch, TN 37013, USA  
Title(s): Director, Custodian of Final Distributions

Chaundra Briggs  
5440 HICKORY WOODS DRIVE  
USA, ANTIOCH, TN 37013  
Title(s): Director

DEBRA RAMSEY  
5440 HICKORY WOODS DRIVE  
USA, ANTIOCH, TN 37013  
Title(s): Secretary

Sybil Pepper-Spencer  
5440 HICKORY WOODS DRIVE  
USA, ANTIOCH, TN 37013  
Title(s): President

Miss CICELY RANDLE  
5440 HICKORY WOODS DRIVE  
USA, ANTIOCH, TN 37013  
Title(s): Treasurer, Custodian of Contributions

**Has any officer, director, manager, operator, or principal of the organization been the subject of an injunction, judgement, or administrative order or been convicted of a felony?**

☐ Yes ☒ No



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## Signature

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I certify that the statements in this registration statement and all supplemental forms, documents, and continuation sheets are true and correct to the best of my knowledge and belief.

I (Chief Fiscal Officer, Treasurer, or Officer) certify, under penalty of perjury, that the above information is true and correct.

**Signed Electronically:** Cicely Randle

**Date:** 09/06/2023

**Title:** Treasurer

I certify that the statements in this registration statement and all supplemental forms, documents, and continuation sheets are true and correct to the best of my knowledge and belief.

I (Chief Fiscal Officer, Treasurer, or Officer) certify, under penalty of perjury, that the above information is true and correct.

**Signed Electronically:** Brenda Joyce Humphrey

**Date:** 09/06/2023

**Title:** Director