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May 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N40783 (5)
1. Corporation Name
HEARTLAND HARVEST CHURCH MINISTRIES, INC.

Principal Place of Business 36 E. MAIN ST AVON PARK FL 33826 US	Mailing Address P O BOX 580 AVON PARK FL 33826 US
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3. Date Incorporated or Qualified
10/11/1990

4. FEI Number 59-2889652	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**HAAS
MARK A
36 EAST MAIN STREET
AVON PARK FL 33825**

10. Name and Address of New Registered Agent

81 Name Haas, Mark A
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Mark A. Haas* **Mark A. Haas** DATE **04-17-98**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		DELETED
TITLE	PD	<input type="checkbox"/>
NAME	HAAS, MARK A	
STREET ADDRESS	750 E. CORNELL ST	
CITY-ST-ZIP	AVON PARK FL	
TITLE	TR	<input checked="" type="checkbox"/>
NAME	YOUNGBLOOD, RALPH	
STREET ADDRESS	2473 STATE RD 17S	
CITY-ST-ZIP	AVON PARK FL	
TITLE	TR	<input checked="" type="checkbox"/>
NAME	HASS, THERESA	
STREET ADDRESS	750 E. CORNELL ST	
CITY-ST-ZIP	AVON PARK FL	
TITLE	TR	<input checked="" type="checkbox"/>
NAME	SPERRY, RUSS	
STREET ADDRESS	2472 W. RUSS RD	
CITY-ST-ZIP	AVON PARK FL	
TITLE	TR	<input type="checkbox"/>
NAME	MOORE, LARRY	
STREET ADDRESS	12 W. ANOKA LANE	
CITY-ST-ZIP	AVON PARK FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 92		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE	TR	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2 NAME	HILTON, RACHEL		
2.3 STREET ADDRESS	1708 EIF. DR.		
2.4 CITY-ST-ZIP	Sebring FL 33872		
3.1 TITLE	TR	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.2 NAME	ORTIZ, DANIEL		
3.3 STREET ADDRESS	2411 W. SEVILLE DR.		
3.4 CITY-ST-ZIP	AVON PARK 33825		
4.1 TITLE	TR	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.2 NAME	WORTINGER, JEREMY		
4.3 STREET ADDRESS	2633 Cheyenne Rd.		
4.4 CITY-ST-ZIP	Sebring FL 33872		
5.1 TITLE	VD	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.2 NAME	MOORE, LARRY		
5.3 STREET ADDRESS	319 dove ave		
5.4 CITY-ST-ZIP	Sebring FL 33872		
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed for on an attachment with an address.

SIGNATURE: *Mark A. Haas* **MARK A. HAAS** DATE **04-17-98** **941-452-5045**

CR2E037 (10/97)