

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000206

**FILED
Apr 28, 2004
Secretary of State**

Entity Name: FINAL HARVEST INTERNATIONAL CHURCH, INC.

Current Principal Place of Business:

11609 S. ORANGE BLOSSOM TRAIL
SUITE 203
ORLANDO, FL 32837 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 770924
ORLANDO, FL 32837 US

New Mailing Address:

FEI Number: 59-3295310 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LANDRAU, PETER REV.
1577 AVLEIGH CIR
ORLANDO, FL 32824 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LANDRAU, PETER
Address: 1577 AVLEIGH CIRCLE
City-St-Zip: ORLANDO, FL 32824

Title: SD () Delete
Name: MALDONALDO, DAISY
Address: 2541 QUAIL PARK TERRACE
City-St-Zip: KISSIMMEE, FL 34743

Title: TD () Delete
Name: BASORA, ELIZABETH
Address: 13616 TETHERLINE TRAIL
City-St-Zip: ORLANDO, FL 32837

Title: VD () Delete
Name: LANDRAU, YVONNE
Address: 1577 AVLEIGH CIRCLE
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELIZABETH BASORA

TD

04/28/2004

Electronic Signature of Signing Officer or Director

Date