

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000834

FILED  
May 05, 2010  
Secretary of State

**Entity Name:** HARVEST BIBLE CHAPEL MIAMI, INC.

**Current Principal Place of Business:**

13105 IXORA COURT  
104  
NORTH MIAMI, FL 33181

**New Principal Place of Business:**

**Current Mailing Address:**

13105 IXORA COURT  
104  
NORTH MIAMI, FL 33181

**New Mailing Address:**

P.O. BOX 530587  
MIAMI SHORES, FL 33153 05

**FEI Number:** 26-4179355      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

FEVIG, JASON  
13105 IXORA COURT  
104  
NORTH MIAMI, FL 33181 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

**OFFICERS AND DIRECTORS:**

**Title:** C  
**Name:** SHAW, KENT  
**Address:** 1000 RANDALL ROAD  
**City-St-Zip:** ELGIN, IL 60123

**Title:** S  
**Name:** MOLINARI, WILLIAM  
**Address:** 1000 RANDALL ROAD  
**City-St-Zip:** ELGIN, IL 60123

**Title:** E  
**Name:** FEVIG, JASON  
**Address:** 13105 IXORA COURT, #104  
**City-St-Zip:** NORTH MIAMI, FL 33181

**Title:** TREA  
**Name:** BLOCHER, THOMAS  
**Address:** 16290 SW 256 STREET  
**City-St-Zip:** HOMESTEAD, FL 33031

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: JASON FEVIG

E

05/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date