2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709513

City-St-Zip:

GAINESVILLE, FL 32605

FILED Mar 27, 2009 Secretary of State

Entity Name: HARVEST CHRISTIAN CHURCH OF GAINESVILLE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 4820 N.W. 34TH STREET GAINESVILLE, FL 326051199 **Current Mailing Address: New Mailing Address:** 4820 N.W. 34TH STREET GAINESVILLE, FL 326051199 FEI Number: 59-6509427 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRENDEMUHL, JOEL H 3120 NW 29TH TERRACE GAINESVILLE, FL 32605 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SEARBY, JOEL Name: Name: Address: 1609 NW 29TH ROAD, #R231 Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: Title: PD () Delete Title: PD (X) Change () Addition Name: BRENDEMUHL, JOEL Name: BRENDEMUHL, JOEL H Address: 3120 NW 29TH TERRACE Address: 3120 NW 29TH TERRACE City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: GAINESVILLE, FL 32605 Title: () Delete Title: () Change () Addition GLOVER, KENNETH Name: Name: 5026 NW 36TH DRIVE Address: Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: () Delete Title: DPT Title: DPT (X) Change () Addition Name: BRENDEMUHL, JOEL Name: BRENDEMUHL, JOEL H Address: 3120 NW 29TH TERRACE Address: 3120 NW 29TH TERRACE GAINESVILLE, FL 32605

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE: JOEL H. BRENDEMUHL DPT 03/27/2009