2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2009
Secretary of State

DOCUMENT# 742894

Entity Name: HARRIS CHAPEL INDEPENDENT HOLINESS CHURCH INC. OF CARYVILLE, FLORIDA

Current Principal Place of Business:

1830 N HWY 179
BONIFAY, FL 32425

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 359
CARYVILLE, FL 32427

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, NORMAN
2258 HAPPY HOLLAND RD
BONIFAY, FL 32425 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: D ( ) Delete
Name: HODGE, EARNEST
Address: 2312 HWY 179
City-St-Zip: BONIFAY, FL 32425

Title: PDT ( ) Delete
Name: SELLERS, ALFRED
Address: 1612 HOLLIDAY RD
City-St-Zip: BONIFAY, FL 32425

Title: DV ( ) Delete
Name: KIMBERL, JOHN
Address: 2276 OTTER COVE RD
City-St-Zip: BONIFAY, FL 32425

Title: D ( ) Delete
Name: BRYANT, JIMMY
Address: 1255-B LEE RD
City-St-Zip: BONIFAY, FL 32425

Title: D ( ) Delete
Name: BRYANT, MARTHA
Address: 1255-B LEE RD
City-St-Zip: BONIFAY, FL 32425

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:

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

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.

SIGNATURE: NORMAN HARRIS O/D 02/24/2009
Electronic Signature of Signing Officer or Director — Date