SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 08, 1999 8:00 am
Secretary of State
09-08-1999 90006 001 ****61.25

DOCUMENT # 754176

1. Corporation Name
HARVEST TEMPLE CHURCH, INC.

* 6 1 3 4 5 3 *
613453 - 90006 - 1

Principal Place of Business	Mailing Address
13301 WALSINGHAM RD LARGO FL 34644	13301 WALSINGHAM RD LARGO FL 34644

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
	26	09/15/1980
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number 59-1118435 ☐ Applied For ☐ Not Applicable
	27	
City & State	City & State	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
	28	
Zip Country	Zip Country	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
25	29 30	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DENHAM, DALE T. 7616 CUMBERLAND RD. LARGO FL 33777	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

1. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
LE	VD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
ME	MARK BRAGUE	1.2 NAME	
REET ADDRESS	13301 WALSINGHAM RD #B	1.3 STREET ADDRESS	
Y-ST-ZIP	LARGO FL 33774	1.4 CITY-ST-ZIP	
E	PD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
ME	DENHAM, DALE T	2.2 NAME	
EET ADDRESS	7616 CUMBERLAND RD.	2.3 STREET ADDRESS	
-ST-ZIP	LARGO FL 33777	2.4 CITY-ST-ZIP	
E	SD ☐ DELETE	3.1 TITLE	SD ☒ Change ☐ Addition
E	CAROL ~~PAULSON~~	3.2 NAME	CAROL BURMOOD
ET ADDRESS	2131 RIDGE ROAD #E27	3.3 STREET ADDRESS	2131 Ridge Rd #E27
-ST-ZIP	LARGO FL 33770	3.4 CITY-ST-ZIP	Largo, FL. 33770
	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
		4.2 NAME	
ET ADDRESS		4.3 STREET ADDRESS	
ST-ZIP		4.4 CITY-ST-ZIP	
	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
		5.2 NAME	
ET ADDRESS		5.3 STREET ADDRESS	
ST-ZIP		5.4 CITY-ST-ZIP	
	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
		6.2 NAME	
T ADDRESS		6.3 STREET ADDRESS	
ST-ZIP		6.4 CITY-ST-ZIP	

Same person Since married

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, or on an attachment with an address, with all other like empowered.

SIGNATURE: (X) Dale T. Denham REQUIRED Dale T. Denham 7/13/99 727-595-2034
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (5/99)