

2002 UNIFORM BUSINESS REPORT (UBR)**FILED****May 29, 2002 8:00 am**
Secretary of State

05-29-2002 93645 012 ****61.25

DOCUMENT # 754176

1. Entity Name

HARVEST TEMPLE CHURCH, INC.

Principal Place of Business

**13301 WALSINGHAM RD
LARGO FL 33774**

Mailing Address

**13301 WALSINGHAM RD
LARGO FL 33774**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1118435

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****DENHAM, DALE T.
7616 CUMBERLAND RD.
LARGO FL 33777**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State****10. OFFICERS AND DIRECTORS****11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	VD	☐ Delete
NAME	DENHAM, MELODY MELODY	
STREET ADDRESS	7616 CUMBERLAND RD	
CITY-ST-ZIP	LARGO FL 33777	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	☐ Delete
NAME	DENHAM, DALE T	
STREET ADDRESS	7616 CUMBERLAND RD.	
CITY-ST-ZIP	LARGO FL 33777	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	SD	☐ Delete
NAME	BURMOOD, CAROL	
STREET ADDRESS	2131 RIDGE ROAD #E27	
CITY-ST-ZIP	LARGO FL 33770	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Delete
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CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
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CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dale Denham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)