

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 757470

FILED

02 NOV 18 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
- 12113



DO NOT WRITE IN THIS SPACE

1. Entity Name

HARVEST, MINISTRIES, ROB HAWKS EVANGELIST ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2822 FORSYTH RD STE 102
STE 102
WINTER PARK FL 32792
US

2822 FORSYTH RD STE 102
STE 102
WINTER PARK FL 32792
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2864435

Applied For

Not Applicable

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

Name

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

City

FL

Zip Code

B. 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 Agents signature required when reinstating)

DATE

FILE NOW: FEE IS \$81.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	HAWKS, REY WILLIAM R, JR	
STREET ADDRESS	3825 STARLIGHT AVE	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HAWKS, BILL SR.	
STREET ADDRESS	3825 STARLIGHT AVE.	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	HAWKS, RHONDA BEA	
STREET ADDRESS	3825 STARLIGHT AVE	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HAWKS, VIRGINIA	
STREET ADDRESS	6225 STARLIGHT AVE	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	AULT, JAY	
STREET ADDRESS	2822 FORSYTH RD STE 102	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	A	<input type="checkbox"/> Delete
NAME	STEPHENS, REV CARL	
STREET ADDRESS	2008 N GOLDENROD ROAD	
CITY-ST-ZIP	ORLANDO FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

300009033663
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02Z037 (9/01)

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 empowers.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

gs 11/21



October 24, 2002

Florida Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

It was brought to our attention that Florida Department of State has not received our check #4779 for the amount of \$52.50. For some reason, if this check would surface, please void and send it back to:

2822 Forsyth Road, Suite 102
Winter Park FL 32792

Please accept the enclosed check for \$52.50 for completion of the filing process for Harvest Ministries, document #757470.

Thank you for your attention to this matter.

Sincerely

A handwritten signature in black ink that reads "Melissa Garcia". The signature is fluid and cursive, with the first name "Melissa" and last name "Garcia" clearly distinguishable.

Melissa Garcia
Administrative Assistant
Onsite Safety Systems

Enclosed