2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765909

FILED Apr 15, 2009 Secretary of State

Entity Name: HARVEST TABERNACLE OF SARASOTA, INC.

Current Principal Place of Business: New Principal Place of Business:

209 N. LIME AVENUE SARASOTA, FL 34237

Current Mailing Address: New Mailing Address:

209 N. LIME AVENUE SARASOTA, FL 34237

FEI Number: 59-2186807 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:

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: MARGARET G MINOR 04/15/2009

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: P () Delete Title: P (X) Change () Addition

 Name:
 MINOR, JAMES W
 Name:
 MINOR, JAMES W P

 Address:
 3111 49TH STREET
 Address:
 3111 49TH STREET

 City-St-Zip:
 SARASOTA, FL 34234
 City-St-Zip:
 SARASOTA, FL 34234

Title: VST () Delete Title: VST (X) Change () Addition Name: MINOR, MARGARET G Name: MINOR, MARGARET G VST Address: 3111 49TH ST. Address: 3111 49TH ST.

City-St-Zip: SARASOTA, FL 34234 City-St-Zip: SARASOTA, FL 34234

Title: D () Delete Title: D (X) Change () Addition
Name: WAINRIGHT, RON Name: WAINRIGHT, RON M D

 Address:
 728 DEAN AVE
 Address:
 5207 CILETTE AVE.

 City-St-Zip:
 SARASOTA, FL 34237
 City-St-Zip:
 NORTH PORT, FL 34288

 Name:
 AMMONS, CLEO
 Name:
 AMMONS, CLEO G D

 Address:
 1210 29TH ST. E
 1210 29TH ST. E

 City-St-Zip:
 PALMETTO, FL 34221
 City-St-Zip:
 PALMETTO, FL 34221

 Name:
 MINOR, JAMES R
 Name:
 MINOR, JAMES R D

 Address:
 4001 TAMPICO DRIVE
 Address:
 4001 TAMPICO DRIVE

 City-St-Zip:
 SARASOTA, FL 34235
 City-St-Zip:
 SARASOTA, FL 34235

Name:BENTLEY, THOMAS JName:BENTLEY, THOMAS J DAddress:3657 OAK GROVE DRIVEAddress:3657 OAK GROVE DRIVECity-St-Zip:SARASOTA, FL 34243City-St-Zip:SARASOTA, FL 34243

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: MARGARET G MINOR VST 04/15/2009