2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2008
Secretary of State

DOCUMENT# F07000001754

Entity Name: NEW HARVEST CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

316 COTHREN ST
WILKESBORO, NC 28697

New Principal Place of Business:

Current Mailing Address:

P O BOX 654
WILKESBORO, NC 28697

New Mailing Address:

FEI Number: 56-2245922 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRANTLEY, JIM
1468 KODAK DR
TITUSVILLE, FL 32796 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: PC ( ) Delete
Name: DYESS, MICHAEL P
Address: P O BOX 678
City-St-Zip: WILKESBORO, NC 28697

Title: VP ( ) Delete
Name: PRICE, MICHAEL J
Address: 5990 STONES DAIRY RD
City-St-Zip: BASSETT, VA 24055

Title: VC ( ) Delete
Name: PRICE, MICHAEL J
Address: 5990 STONES DAIRY RD
City-St-Zip: BASSETT, VA 24055

Title: SD ( ) Delete
Name: GRIFFITH, JACKSON C
Address: 2415 FISHING CREEK RD
City-St-Zip: WILKESBORO, NC 28697

Title: TD ( ) Delete
Name: CARR, FRAN M
Address: 5145 SOMERS RD
City-St-Zip: HAMPTONVILLE, NC 27020

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: MICHAEL P. DYESS PC 04/13/2008
Electronic Signature of Signing Officer or Director — Date