

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001754

FILED  
Sep 21, 2009  
Secretary of State

**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 ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**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: VC      (X) Change ( ) Addition  
Name: LANKFORD, JAMES E  
Address: P.O. BOX 991  
City-St-Zip: WILKESBORO, NC 28697

Title: SD      (X) Change ( ) Addition  
Name: RUSSELL, MARK G  
Address: 237 GLENN CARLTON ROAD  
City-St-Zip: BOOMER, NC 28606

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

09/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date