200	1 UNIFORM BUSI	NESS REPO	RT /IIRI	 R1		
DOCU	JMENT#N0000	0003382	<u> </u>			·
Tin	he of Harvest	Ministries :	Inc.		Table 1	
Principal Pla	ice of Business	Mailing Address	7*		01 SEP 17 A	M 10: 59
914	coble Dr			•		
	ihassee, 7l 82301				SERRETARY TALLWARDSER	E, FLORIDA
	Place of Business	3. Mailing Address				
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN T	HIS SPACE
City & Sta	la haesee, H	City & State		4. FEI Numb	per	Applied For Not Applicable
Zip 3232	Country Floretta	Zip .	Country	5. Certificat	e of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current F	Registered Agent		7. Name an	d Address of New Registe	red Agent
344	phanie Nunne		Name			
91	H cobbe Dr		Street A	ddress (P.O. Box Numb	er is Not Acceptable)	
101	19 hosser, 76 323	امر		,u	· · · · · · · · · · · · · · · · · · ·	
	14.100001 10 328	SO!	City	***	***************************************	17:0:1
						rr∎   Zip Code
8. The above	e named entity submits this statement for	the purpose of changing its r		registered agent, or bo		FL Zip Code
8. The above	84 m	um	egistered office or	registered agent, or bo	oth, in the state of Florida.	FL Zip Code
	Stephene n	um	egistered office or  Registered Agent signals.		oth, in the state of Florida.  9-/ DA  Make Che	FL
SIGNATURE	Signature, type or printed name of registered agent and FILE NOW: FEE IS \$61.25  OFFICERS AND DIRE	9. Election Campaign I Trust Fund Contribut	egistered office or  Registered Agent signal.  Financing lion.	\$5.00 May Be Added to Fees	oth, in the state of Florida.  9-/ DA  Make Che	Ck Payable to elent of State
SIGNATURE  10.  TITLE	Signature, type or printed name of registered agent and FILE NOW: FEE IS \$61.25  OFFICERS AND DIRE	d title if applicable (NOTE:  9. Election Campaign I Trust Fund Contribut	egistered office or  Registered Agent signals  Financing lion	\$5.00 May Be Added to Fees	oth, in the state of Florida.  9-/ DA  Make Che Departm	Z-O/  NE  ck Payable to elent of State
SIGNATURE  10. TITLE NAME STREET ADDRESS	Signature, type or printed name of registered agent and FILE NOW: FEE IS \$61.25  OFFICERS AND DIRE DIRECTOR SHEP MARIE NUMBER SIMPLES OF THE STATE O	9. Election Campaign I Trust Fund Contribul  ECTORS	egistered office or  Registered Agent signal.  Financing lion.   11.  TITLE  NAME  STREET ADDRESS	\$5.00 May Be Added to Fees	oth, in the state of Florida.  9-/ DA  Make Che Departm	Ck Payable to elent of State
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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.

9-17-01

CITY-ST-ZIP

SIGNATURE: \_