2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005
Secretary of State

DOCUMENT# N00000004314

Entity Name: MESSIAH'S HARVEST CHURCH, INC.

Current Principal Place of Business:

4700 SADDLEHORN TRL
MIDDLEBURG, FL 32068

New Principal Place of Business:

Current Mailing Address:

PO BOX 65446
ORANGE PARK, FL 32065

New Mailing Address:

FEI Number: 59-3664926 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RALEY, MASON D
4700 SADDLEHORN TRL
MIDDLEBURG, FL 32068 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: PCOB ( ) Delete
Name: RALEY, MASON D
Address: 4700 SADDLEHORN TRAIL
City-St-Zip: MIDDLEBURG, FL 32068

Title: VD ( ) Delete
Name: LOSSEN, ROBERT E JR
Address: 1960 TIMUCANA TRAIL
City-St-Zip: MIDDLEBURG, FL 32068

Title: SD ( ) Delete
Name: LOSSEN, ROBERT E JR.
Address: 1960 TIMUCUA TR.
City-St-Zip: MIDDLEBURG, FL 32068

Title: TD ( ) Delete
Name: HOLLIDAY, WINONA G
Address: 8102 COATBRIDGE LN. EAST
City-St-Zip: JACKSONVILLE, FL 32244

Title: D (X) Delete
Name: HOLSTON, JOHN JR.
Address: 2927 WATERVIEW CIR.
City-St-Zip: ORANGE PARK, FL 32073

Title: D ( ) Delete
Name: RALEY, DIANNA M
Address: 4700 SADDLEHORN TRL
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change ( ) Addition
Name: LOSSEN, ROBERT E JR
Address: 1960 TIMUCUA TRAIL
City-St-Zip: MIDDLEBURG, FL 32068

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: WANAT, ANITA
Address: 3060 SETH DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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 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 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: MASON D. RALEY PCOB 04/13/2005

Electronic Signature of Signing Officer or Director — Date