

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004314

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: MESSIAH'S HARVEST CHURCH, INC.

**Current Principal Place of Business:**

3312 TALISMAN DRIVE  
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  
3312 TALISMAN DRIVE  
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: 3312 TALISMAN DRIVE  
City-St-Zip: MIDDLEBURG, FL 32068

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

Title: VD ( ) Delete  
Name: RALEY, DIANNA M  
Address: 3312 TALISMAN DRIVE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: TD (X) Delete  
Name: ESMOND, MICHAEL O  
Address: 11080 ASHFORD GABLE PLACE  
City-St-Zip: JACKSONVILLE, FL 32257

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: STD (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: ( ) 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: MASON D RALEY

PCOB

04/22/2009

Electronic Signature of Signing Officer or Director

Date