

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 09, 2003 8:00 am
Secretary of State

01-09-2003 90011 028 ****70.00

DOCUMENT # N00000004314

1. Entity Name
MESSIAH'S HARVEST CHURCH, INC.



Principal Place of Business

**14 CONIFER CIR.
MIDDLEBURG FL 32068**

Mailing Address

**PO BOX 65446
ORANGE PARK FL 32065**

70002373



2. Principal Place of Business

4700 Saddlehorn Trail

3. Mailing Address

Suite, Apt. #, etc.

City & State
Middleburg Florida

City & State

4. FEI Number **59-3664926**

Applied For

Not Applicable

Zip

32068

Country

USA

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**RALEY, MASON D
14 CONIFER CIR.
MIDDLEBURG FL 32068**

7. Name and Address of New Registered Agent

Name **RALEY, MASON D.**

Street Address (P.O. Box Number is Not Acceptable)

4700 Saddlehorn Trail

City **Middleburg**

FL

Zip Code

32068

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PCOB** ☐ Delete
NAME **RALEY, MASON D**
STREET ADDRESS **14 CONIFER CIR.**
CITY-ST-ZIP **MIDDLEBURG FL 32068**

TITLE **VD** ☐ Delete
NAME **LOSSBIN, ROBERT E JR**
STREET ADDRESS **1960 TIMUCANA TRAIL**
CITY-ST-ZIP **MIDDLEBURG FL 32068**

TITLE **SD** ☐ Delete
NAME **LOSSEN, ROBERT E JR.**
STREET ADDRESS **1960 TIMUCUA TR.**
CITY-ST-ZIP **MIDDLEBURG FL 32068**

TITLE **TD** ☐ Delete
NAME **HOLLIDAY, WINONA G**
STREET ADDRESS **8102 COATBRIDGE LN. EAST**
CITY-ST-ZIP **JACKSONVILLE FL 32244**

TITLE **D** ☐ Delete
NAME **HOLSTON, JOHN JR.**
STREET ADDRESS **2927 WATERVIEW CIR.**
CITY-ST-ZIP **ORANGE PARK FL 32073**

TITLE **D** ☐ Delete
NAME **RALEY, DIANNA M**
STREET ADDRESS **14 CONIFER CIR.**
CITY-ST-ZIP **MIDDLEBURG FL 32068**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☒ Change ☐ Addition
NAME **LOSSEN, ROBERT E JR**
STREET ADDRESS **1960 Timucua Trail**
CITY-ST-ZIP **Middleburg, FL 32068**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **RALEY, DIANNA M.**
STREET ADDRESS **4700 Saddlehorn Trail**
CITY-ST-ZIP **Middleburg, FL 32068**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

Mason D. Raley

1-6-03

904-291-5043

FILE 2003 (10/02)