

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004425

FILED
Jul 03, 2007
Secretary of State

Entity Name: SOUL HARVEST CHURCH OF GOD, INC.

Current Principal Place of Business:

2029 PHOENIX AVE
JACKSONVILLE, FL 32206

New Principal Place of Business:

5028 PLYMOUTH ST
UNIT 1
JACKSONVILLE, FL 32206

Current Mailing Address:

3516 WINTON DRIVE
JACKSONVILLE, FL 32206

New Mailing Address:

P O BOX 28314
JACKSONVILLE, FL 32226

FEI Number: 59-3666835 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:

MORRIS, DARNELL L SR
2029 PHOENIX AVE
JACKSONVILLE, FL 32206 US

Name and Address of New Registered Agent:

MORRIS, DARNELL L SR
11544 TORI LANE
JACKSONVILLE, FL 32218 US

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: DARNELL MORRIS SR

07/03/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORRIS, DARNELL L SR
Address: 2029 PHOENIX AVE
City-St-Zip: JACKSONVILLE, FL 32206

Title: D3 () Delete
Name: MORRIS, DARNELL
Address: 2029 PHOENIX AVE
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Delete
Name: BAKER, CLARICE
Address: PO BOX 28314
City-St-Zip: JACKSONVILLE, FL 32226

Title: D () Delete
Name: SAMPSON, MERCEDES
Address: POST OFFICE BOX 28314
City-St-Zip: JACKSONVILLE, FL 32226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORRIS, CLARICE M
Address: 11544 TORI LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D3 (X) Change () Addition
Name: SAMUELS, LONNIE III
Address: 5327 TIMUQUANA RD T106
City-St-Zip: JACKSONVILLE, FL 32210

Title: D (X) Change () Addition
Name: SAMPSON, MERCEDES
Address: PO BOX 28314
City-St-Zip: JACKSONVILLE, FL 32226

Title: D (X) Change () Addition
Name: BAKER, MARLON
Address: POST OFFICE BOX 28314
City-St-Zip: JACKSONVILLE, FL 32226

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: CLARICE MORRIS

P

07/03/2007

Electronic Signature of Signing Officer or Director

Date