

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 11, 2011**  
**Secretary of State**

DOCUMENT# N00000004425

**Entity Name:** SOUL HARVEST CHURCH OF GOD, INC.**Current Principal Place of Business:**2018 GILMORE ST  
JACKSONVILLE, FL 32204**New Principal Place of Business:****Current Mailing Address:**P O BOX 16384  
JACKSONVILLE, FL 32236**New Mailing Address:**5417 SHADY PINE ST S  
JACKSONVILLE, FL 32244**FEI Number:** 59-3666835**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MORRIS, CLARICE  
2018 GILMORE ST  
JACKSONVILLE, FL 32204 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: P  
Name: MORRIS, CLARICE M  
Address: 2018 GILMORE ST  
City-St-Zip: JACKSONVILLE, FL 32204

Title: D  
Name: SAMUELS, LONNIE III  
Address: 5417 SHADY PINES ST S  
City-St-Zip: JACKSONVILLE, FL 32244

Title: D  
Name: SAMPSON, MERCEDES  
Address: PO BOX 16384  
City-St-Zip: JACKSONVILLE, FL 32236

Title: D  
Name: BAKER, MARLON  
Address: POST OFFICE BOX 16384  
City-St-Zip: JACKSONVILLE, FL 32236

I hereby 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 all other like empowered.

SIGNATURE: CLARICE MORRIS

P

05/11/2011

Electronic Signature of Signing Officer or Director

Date