2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001579

Sec

Jan 23, 2009 Secretary of State

FILED

Entity Name: REAPERS OF THE HARVEST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 722 HIGHWAY 90 WEST 16139 W US HIGHWAY 90 GREENVILLE, FL 32331 GREENVILLE, FL 32331

Current Mailing Address: New Mailing Address:

P.O. BOX 722 HIGHWAY 90 WEST GREENVILLE, FL 32331

FEI Number: 11-3745976 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STOVER, JAMES E 192 SW SEVEN BRIDGES RD GREENVILLE, FL 32331 US

OFFICERS AND DIRECTORS:

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

Electronic Signature of Registered A

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 LEE, RONALD
 Name:
 EMERSON, JOAN

 Address:
 RT. 3 BOX 7B
 Address:
 152 N W REAMS ST

 City-St-Zip:
 GREENVILLE, FL 32331
 City-St-Zip:
 GREENVILLE, FL 32331

Title: T () Delete Title: () Change () Addition

 Name:
 MERTIE, TUTEN
 Name:

 Address:
 911 SW EDGEWOOD AVE
 Address:

 City-St-Zip:
 GREENVILLE, FL 32331
 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

Name: STOVER, JIMMY Name: STOVER, JAMES

Address: 192 S.W. SEVEN BRIDGES ROAD Address: 192 S.W. SEVEN BRIDGES ROAD
City-St-Zip: GREENVILLE, FL 32331 City-St-Zip: GREENVILLE, FL 32331

Olty-St-Zip. Greenville, FL 32331 Olty-St-Zip. Greenville, FL 32331

 Title:
 S
 () Delete
 Title:
 T
 (X) Change () Addition

Name: LEE, SANDY ANN Name: STOVER, LANITA

Address: 331 ORIOLE WAY Address: 192 SW SEVEN BRIDGES ROAD

City-St-Zip: GREENVILLE, FL 32331 City-St-Zip: GREENVILLE, FL 32331

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: JAMES STOVER T 01/23/2009