

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002195

FILED  
May 01, 2005  
Secretary of State

**Entity Name:** ROYAL HARVEST EVANGELISTIC MINISTERIAL ASSOCIATION INTERNATIONAL, INC.

**Current Principal Place of Business:**

5174 SOUTH US HWY 441  
LAKE CITY, FL 32025

**New Principal Place of Business:**

602 SW CLINT WAY  
LAKE CITY, FL 32024

**Current Mailing Address:**

P.O.BOX 2222  
LAKE CITY, FL 32056

**New Mailing Address:**

**FEI Number:** 42-1581506      **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:**

KARPINSKI, KENNETH J  
5174 SOUTH US HWY 441  
LAKE CITY, FL 32025      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: PCD      ( ) Delete  
Name: KARPINSKI, KENNETH J  
Address: RT 6 BOX 1493 HWY 441 S  
City-St-Zip: LAKE CITY, FL 32025

Title: VTD      ( ) Delete  
Name: KARPINSKI, BARBARA D  
Address: RT 6 BOX 1493 HWY 441 S  
City-St-Zip: LAKE CITY, FL 32025

Title: SD      ( ) Delete  
Name: HOWARD, LILIANNA  
Address: 1284 NW LABONTE LANE  
City-St-Zip: LAKE CITY, FL 32055

Title: D      ( ) Delete  
Name: NEWMAN, LOLA  
Address: 448 SW LEGREE TERRACE  
City-St-Zip: FORT WHITE, FL 32038

Title: D      ( ) Delete  
Name: SCHUSTER, CHERYL N  
Address: 162 SE MONTGOMERY PLACE  
City-St-Zip: LAKE CITY, FL 32025

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

Title: PCD      (X) Change ( ) Addition  
Name: KARPINSKI, KENNETH J  
Address: 5174 SOUTH US HWY 441  
City-St-Zip: LAKE CITY, FL 32025

Title: VTD      (X) Change ( ) Addition  
Name: KARPINSKI, BARBARA D  
Address: 5174 SOUTH US HWY 441  
City-St-Zip: LAKE CITY, FL 32025

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

Title: D      (X) Change ( ) Addition  
Name: NEWMAN, LOLA  
Address: 448 SW LEGREE TERRACE, BLDG 1  
City-St-Zip: FORT WHITE, FL 32038

Title: D      (X) Change ( ) Addition  
Name: NEWMAN, KIMBERLI  
Address: 448 SW LEGREE TERRACE, BLDG 2  
City-St-Zip: FORT WHITE, FL 32038

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KENNETH J KARPINSKI

PCD

05/01/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date