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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

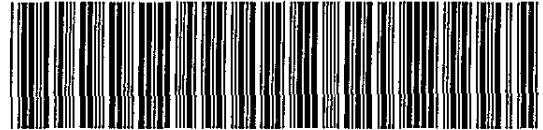
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF REVENUE
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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Harvest International Worship Center, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Reverend Bryan D. Rose

Name (Printed or typed)

8915 Legacy Ct., Apt. 102

Address

Kissimmee, FL 34747

City, State & Zip

407-828-3814 or 407-414-4338

Daytime Telephone number

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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Harvest International Worship Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8915 Legacy Ct., Apt. 102
Kissimmee, FL 34747

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide religious services, as allowed by law. To enhance community development through faith-based programs and initiatives.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The Board of Directors will review and make recommendation to the Chief Executive Officer, who will then make the final decision.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Bryan Rose, President & Chief Executive Officer; 8915 Legacy Ct., apt.102, Kissimmee, FL 34747
Daria Rose, Director of Special Needs & Sr. Administrative Support; address same as above
Melissa Peoples, Director of Community Outreach; 2610 Orono Pike, Reynoldsburg, OH 43068
Nicholas Peoples, Director of Family Growth & Community Development; 2610 Orono Pike, Reynoldsburg, OH 43068
Mike Rose, Chief Operating Officer & Director of Music; 5997 Aqua-Marine Dr., Grove City, OH 43123
Debbie Rose, Director of Education; 5997 Aqua-Marine Dr., Grove City, OH 43123

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Bryan D. Rose
8915 Legacy Ct., apt.102
Kissimmee, FL 34747

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Reverend Bryan D. Rose
8915 Legacy Ct., Apt.102
Kissimmee, FL 34747

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

BRYAN Rose

Date

6-24-04

Signature/Incorporator

BRYAN Rose

Date

6-24-04