## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000009272

FILED Jan 06, 2009 Secretary of State

Entity Name: HARVEST BIBLE CHAPEL OF ORLANDO, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4609 VINELAND RD 2ND FL ORLANDO, FL 32811 **New Mailing Address: Current Mailing Address:** PO BOX 617677 ORLANDO, FL 32861 FEI Number: 26-1131242 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: TISCH, DEAN 4609 VINELAND ROAD 2ND FLOOR ORLANDO, FL 32811 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PIERRE, SCOTT Name: Name: Address: 5378 ISLEWORTH COUNTRY CLUB DR. Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition ANDERSON, JOEL Name: Name: ANDERSON, JOEL Address: 1370 LOCH LOMOND Address: 331 DUFF DRIVE City-St-Zip: CRYSTAL LAKE, IL 60014 City-St-Zip: WINTER GARDEN, FL 34787 Title: () Delete Title: (X) Change ( ) Addition TISCH, DEAN Name: TISCH, DEAN Name: 4609 VINELAND ROAD, 2ND FLOOR 6 EDENTON COURT Address: Address: City-St-Zip: ORLANDO, LF 32811 City-St-Zip: OCOEE, FL 34761 ( ) Delete Title: Title: ( ) Change (X) Addition SCHMIDT, TRACY Name: Name: 6055 LOUISE COVE DRIVE Address: Address: City-St-Zip: City-St-Zip: WINDERMERE, FL 34786

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: DEAN TISCH D 01/06/2009