2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16038

FILED Feb 23, 2009 Secretary of State

Entity Name: HARVEST FIRE WORSHIP CENTER, HOLLYWOOD, INC.

Current Principal Place of Business: New Principal Place of Business: 6024 WASHINGTON STREET HOLLYWOOD, FL 33023 **Current Mailing Address: New Mailing Address:** 6024 WASHINGTON STREET HOLLYWOOD, FL 33023 US FEI Number: 59-2793809 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRANCIS, RUDOLPH FRANCIS, RUDOLPH 1101 NW 44 TERR 4750 N.W. 22ND CT. LAUDERHILL, FL 33312 US 320 LAUDERHILL, FL 33312 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: RUDOLPH FRANCIS 02/23/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CLARKE, DONALD F Name: Name: 395 NE 154 ST Address: Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip: Title: () Delete Title: () Change () Addition FRANCIS, RUDOLPH Name: Name: Address: 4750NW 22ND CT Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: Title: () Delete Title: () Change () Addition FRANCIS, YVONNETTE Name: Name: 4750 NW 22ND CT 320 Address: Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: Title: () Delete Title: () Change () Addition STENNET, HELENA Name: Name: 1211 NW 207 ST. Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: Title: () Delete Title: () Change () Addition WATSON, JOAN Name: Name: 2929 E. MISSIONWOOD CIR. Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: Title: () Delete Title: () Change () Addition BECKFORD, IAN Name: Name: Address: 10001 SW 12TH ST Address: PEMBROKE PINES, FL 33025 City-St-Zip: City-St-Zip:

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: RUDOLPH FRANCIS VP 02/23/2009