

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS



FILED

99 MAY 18 AM 8:53

STATE OF FLORIDA  
 TALLAHASSEE, FLORIDA

DOCUMENT # N46673

1. Corporation Name  
**HARVEST INSPIRATION MINISTRIES, INC.**

Principal Place of Business  
 2844 PONKAN ROAD  
 APOPKA FL 32712  
 US

Mailing Address  
 2844 PONKAN ROAD  
 APOPKA FL 32712  
 US



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	12/30/1991
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	59-3097830
24 Country	29 Country	Applied For
		Not Applicable
9. Name and Address of Current Registered Agent		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
		10. Name and Address of New Registered Agent

WHITE, BRENDAN  
 2011 HIDDEN DALE CT  
 KISSIMMEE FL 34714

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	100002892591-4 -06/02/99--01049--024
84 City	***61.25 FL 05 28 61.25

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Brendan White* DATE 2-22-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	C
NAME	GRAY, DONALD	1.2 NAME	Jack Wright
STREET ADDRESS	3900 CITRUS ST	1.3 STREET ADDRESS	154 Sue Dr.
CITY-ST-ZIP	KISSIMMEE FL	1.4 CITY-ST-ZIP	Altamonte Springs, FL 32714
	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	D
TITLE	VC	2.2 NAME	Hector Perez
NAME	WHITE, BRENDAN	2.3 STREET ADDRESS	1226 Adirondack
STREET ADDRESS	2011 HIDDEN DALE CT	2.4 CITY-ST-ZIP	Apopka, FL 32712
CITY-ST-ZIP	KISSIMMEE FL		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	3.1 TITLE	S
TITLE	S	3.2 NAME	Larry Peterson
NAME	GRAY, SHIRLEY	3.3 STREET ADDRESS	22310 Orange Blossom Lane
STREET ADDRESS	3900 CITRUS STREET	3.4 CITY-ST-ZIP	Eustis, FL 32736
CITY-ST-ZIP	KISSIMMEE FL		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	D
TITLE	T	4.2 NAME	Dorothy Williams
NAME	LESLIE DILLER	4.3 STREET ADDRESS	1212 N. Jacks Lake Rd.
STREET ADDRESS	6256 PLYMOUTH SORRENTO RD	4.4 CITY-ST-ZIP	Clermont, FL 34711
CITY-ST-ZIP	APOPKA FL 32712		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	5.1 TITLE	D
TITLE	D	5.2 NAME	Charles Venturella
NAME	WALTER RICHMOND	5.3 STREET ADDRESS	6932 Sylvan Woods Dr.
STREET ADDRESS	920 PELICAN BAY DR	5.4 CITY-ST-ZIP	Sanford, FL 32771
CITY-ST-ZIP	DAYTONA BCH FL 32119		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	6.1 TITLE	D
TITLE	D	6.2 NAME	Harold Diller
NAME	JACK WRIGHT	6.3 STREET ADDRESS	6256 Plymouth-Sorrento Rd.
STREET ADDRESS	154 SUE DR	6.4 CITY-ST-ZIP	Apopka, FL 32712
CITY-ST-ZIP	ALTAMONTE SPRGS FL 32714		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Brendan White* BRENDAN WHITE DATE 2-22-99 DAYTIME PHONE # 407-846-3521

CR2E037 (11/98)