FILED
May 26, 2005 8:00 am
Secretary of State
05-26-2005 90027 019 ****61.25

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N46673

1. Entity Name
HARVEST INSPIRATION MINISTRIES, INC.

Principal Place of Business	Mailing Address
2844 PONKAN ROAD APOPKA, FL 32712 US	2844 PONKAN ROAD APOPKA, FL 32712 US

04182005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 9-3097830 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PEREZ, HECTOR 1226 ADIRONDACK CT. APOPKA, FL 32712	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C PEREZ, HECTOR 1226 ADIRONDACK CT. APOPKA, FL 32712	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC SWEARINGEN, MARC 3000 CLAREONA RD. #2515 APOPKA, FL 32703	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARITZA, PEREZ 1226 ADIRONDACK CT. APOPKA, FL 32712	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Joni Henderson 7336 Raymond st. Tangerine, FL 32777	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILAN, JERRY 4422 ROUNDLAKE RD. APOPKA, FL 32712	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Milam, Jerry	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HELM, DON 2920 PONKAN ROAD APOPKA, FL 32712	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Heardley Murdock 388 Menashe ct Longwood, FL 32779	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HENDERSON, RALPH 7336 RAYMOND ST. TANGERINE, FL 32777	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Ron Tudela 20034 Black Panther Altoona, FL 32702	☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hector Perez 4/25/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #