


**FILED**  
**May 14, 1999 8:00 am**  
**Secretary of State**

05-14-1999 90010 049 \*\*\*122.50

<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # N48816</b>					
1. Corporation Name <b>HARVEST FELLOWSHIP BIBLE CHURCH, INC.</b>					
Principal Place of Business <b>3806 N NEBRASKA AVENUE TAMPA FL 33611</b>			Mailing Address <b>3806 N NEBRASKA AVENUE TAMPA FL 33611</b>		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		05/11/1992	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-3131018	
24 Country		29 Country		5. Certificate of Status Desired - <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
<b>SCAGLIONE, PETER JR. 2127 W. DR. MARTIN LUTHER KING JR. TAMPA FL 33607</b>				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	
FL					

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 of an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

2-2-98

813 228 0230

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/1/98)

## HARVEST FELLOWSHIP BII

*"A Church That Is ADVANCING The Ki  
Dr. Micheal W. Lewis, Sr., Pastor and .*

HARVEST FELLOWSHIP BIBLE CHURCH, INC.

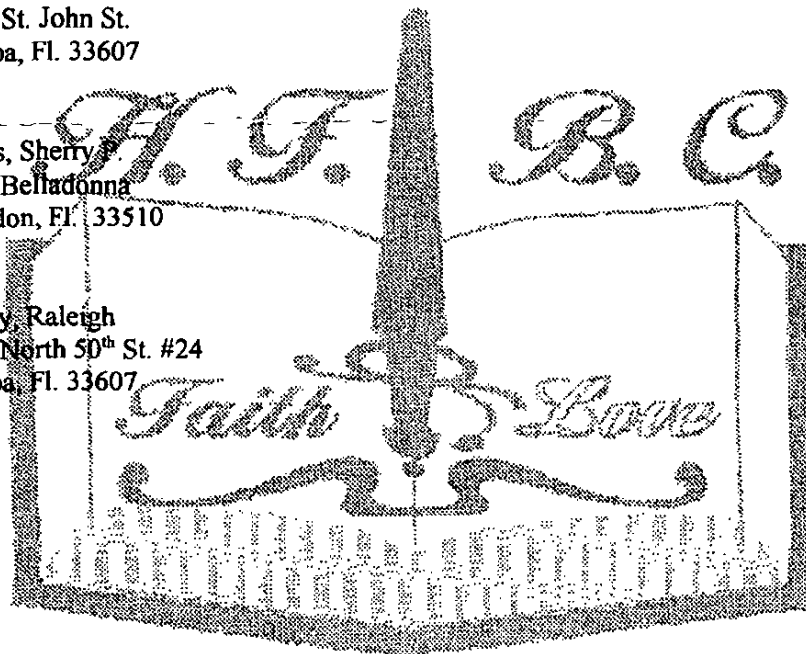
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### Additions to Corporation's Officers and Directors

1. D  
Gaines, Marc  
1913 St. John St.  
Tampa, Fl. 33607
2. M  
Lewis, Sherry  
1211 Belladonna  
Brandon, Fl. 33510
3. M  
Holley, Raleigh  
8733 North 50<sup>th</sup> St. #24  
Tampa, Fl. 33607



*"One Church In Three Locations"*

Corporate Location and Mailing Address:  
3800 North Nebraska Avenue  
Tampa, Florida 33603  
(813) 228-0230

10312 Bloomingdale Avenue  
Riverview, Florida 33569  
(813) 626-8222

2626 Northeast 10th Street  
Ocala, Florida 34470  
(888) 339-6161