

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 01, 2001 8:00 am**  
**Secretary of State**

06-01-2001 90002 044 \*\*\*\*65.00

**DOCUMENT # N48816**

1. Entity Name

**HARVEST FELLOWSHIP BIBLE CHURCH, INC.**

**772207**



DO NOT WRITE IN THIS SPACE

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	3. Mailing Address
--------------------------------	--------------------

Suite, Apt. #, etc.	Suite, Apt. #, etc.
---------------------	---------------------

City & State	City & State
--------------	--------------

4. FEI Number <b>59-3131018</b>	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

Zip	Country	Zip	Country
-----	---------	-----	---------

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
---	---------------------------------------

**6. Name and Address of Current Registered Agent**

**MOSS, MARILYN-F  
810 STRATFORD AVE  
TAMPA FL 33603**

**7. Name and Address of New Registered Agent**

Name: **Sean White**  
 Street Address (P.O. Box Number is Not Acceptable): **810 Stratford Avenue Blvd**  
 City: **TAMPA** FL Zip Code: **33603**

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. **33613**

SIGNATURE: *[Signature]* DATE: **1/3/01**

Signature, typed or printed name of registered agent and title if applicable. (NOT: Registered Agent signature required when reinstating)

**FILE NOW:  
FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>LEWIS, MICHAEL W 1211 BELLADONNA BRANDON FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <input type="checkbox"/> Delete <b>MONTGOMERY, KIMBERLY 810 STRATFORD AVE. TAMPA FL 33603</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <input checked="" type="checkbox"/> Delete <b>MOSS, MARILYN 810 STRATFORD AVE TAMPA FL 33603</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>WHITE, SEAN 817 CHESS PLACE SEFFNER FL 33584</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>M</b> <input type="checkbox"/> Delete <b>LEWIS, SHERRY 1211 BELLADONNA BRANDON FL 33510</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>M</b> <input type="checkbox"/> Delete <b>DICKERSON, NICHOLAS 2921 FOLKLORE DRIVE VALNCO FL 33595</b>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Myrtle Martinez 5202 E. 32nd St Tpa, FL 33603</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>D White, Sean 810 Stratford Ave Tampa, FL 33510</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 another like empowered

SIGNATURE: *[Signature]* **1-3-01** **813-228-0230**

CR2E037 (10/00)