## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000001273

FILED Jun 28, 2005 Secretary of State

Entity Name: HARVEST FELLOWSHIP CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 407 HATLEY ST. JASPER, FL 32052 **Current Mailing Address: New Mailing Address:** P.O. BOX 1512 JASPER, FL 32052 FEI Number: 59-3184206 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THOMASON, JERRY A 407 E HATLEY ST JASPER, FL 32052 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete KNIGHT, JAMES Name: Name: Address: 5158 SW 69TH BLVD. Address: City-St-Zip: JASPER, FL 32052 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition Name: PARSONS, ROGER Name: EVANS, BILLY Address: 294 NE PEASXHTREE ST. Address: 4105 NE 112TH PL City-St-Zip: LEE, FL 32059 City-St-Zip: JASPER, FL 32052 Title: () Delete Title: () Change () Addition JENKINS, DON Name: Name: 6346 SR 6 W Address: Address: City-St-Zip: JASPER, FL 32052 City-St-Zip: Title: Title: () Change () Addition ( ) Delete Name: LESSMAN, ANN Name: 407 2ND ST 4TH AVE., P.O. BOX 214 Address: Address: City-St-Zip: JASPER, FL 32052 City-St-Zip: Title: Title: ( ) Delete () Change () Addition THOMASON, JERRY A Name: Name: P.O. BOX 1512, 3770 N HWY 129 Address: Address: City-St-Zip: JASPER, FL 32052 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition KNIGHT, GERALDINE LESSMAN, KIM Name: Name: Address: 709 S.W. 5TH STREET Address: 605 6TH AVE NW JASPER, FL 32052 JASPER, FL 32052 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JERRY A THOMASON P 06/28/2005