

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001273

FILED
May 07, 2008
Secretary of State

Entity Name: HARVEST FELLOWSHIP CHURCH, INC.

Current Principal Place of Business:

5544US HWY 129 S
JASPER, FL 32052

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1512
JASPER, FL 32052

New Mailing Address:

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:

THOMASON, JERRY A
3770 N. HWY 129
JASPER, FL 32052 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: SANCHEZ, BRENDA
Address: 10451 30TH DRIVE
City-St-Zip: JASPER, FL 32052

Title: D () Delete
Name: PEREZ, HORACIO
Address: 407 15TH AVE.
City-St-Zip: JASPER, FL 32052

Title: D () Delete
Name: SMITH, MARK
Address: 14675 CR 6
City-St-Zip: JASPER, FL 32052

Title: D () Delete
Name: BOZEMAN, MARK
Address: 427 VICKERS CT.
City-St-Zip: JASPER, FL 32052

Title: P () Delete
Name: THOMASON, JERRY A
Address: P.O. BOX 1512, 3770 N HWY 129
City-St-Zip: JASPER, FL 32052

Title: D () Delete
Name: LESSMAN, KIM
Address: 605 6TH AVE NW
City-St-Zip: JASPER, FL 32052

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WATERS, ARCHIE
Address: 5746 SW CR 751
City-St-Zip: JASPER, FL 32052

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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

PRES

05/07/2008

Electronic Signature of Signing Officer or Director

Date