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Feb 26 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000001970 (2)

1. Corporation Name

HARVEST CHURCH INTERNATIONAL, INC.

Principal Place of Business

7236 S. R. 52, SUITE 6
BAYONET POINT FL 34667

Mailing Address

POST OFFICE BOX 7146
HUDSON FL 34674-71463. Date Incorporated or Qualified
04/21/19943a. Date of Last Report
03/18/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

59-3260379

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCKINNEY, LOUISE
8329 KATHLEEN DRIVE
HUDSON FL 34667

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 PD ☐ DELETENAME OBLANDER, DAVID
STREET ADDRESS 7808 DUCK POND COURT
CITY-ST-ZIP HUDSON FL 34667TITLE D ☐ DELETENAME OBLANDER, SIGI
STREET ADDRESS 7808 DUCK POND COURT
CITY-ST-ZIP HUDSON FL 34667TITLE TD ☐ DELETENAME ROZKOWSKI, GARY
STREET ADDRESS 7805 SYLVAN DRIVE
CITY-ST-ZIP HUDSON FL 34667TITLE SD ☐ DELETENAME MCKINNEY, LOUISE
STREET ADDRESS 8329 KATHLEEN DRIVE
CITY-ST-ZIP HUDSON FL 34667TITLE VD ☐ DELETENAME RAGER, RON
STREET ADDRESS 5024 OYSTER COVE
CITY-ST-ZIP NEW PORT RICHEY FL 34652TITLE D ☐ DELETENAME RAGER, BETH
STREET ADDRESS 5024 OYSTER COVE
CITY-ST-ZIP NEW PORT RICHEY FL 34652

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 on an attachment with an address.

SIGNATURE:

DAVID OBLANDER

2-17-97

813-861-0200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0088461

CR2E037 (9/96)