

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000005969 (9)**

1. Corporation Name

**WILLIAM J. BRANTLEY'S MINISTRIES/HARVEST TIME FE
LLOWSHIP, INC.**



Principal Place of Business 7860 SW 197TH TERRACE MIAMI FL 33189	Mailing Address 7860 SW 197TH TERRACE MIAMI FL 33189-2167
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2. Principal Place of Business 21 7860 SW 197TH TERRACE		2a. Mailing Address 26 7860 SW 197TH TERRACE		3. Date Incorporated or Qualified 12/13/1995	3a. Date of Last Report 04/25/1996
Suite, Apt. #, etc. 22 MIAMI, FLA.		Suite, Apt. #, etc. 27		4. FEI Number 65-0643380	Applied For <input type="checkbox"/> Not Applicable
City & State 23 MIAMI, FLA.		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24	Country 25	Zip 29	Country 30	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent WOLFE, LARRY 200 - A JOHN KNOX ROAD TALLAHASSEE FL 32303-6643		10. Name and Address of New Registered Agent 81 Name WILLIAM J. BRANTLEY 82 Street Address (P.O. Box Number is Not Acceptable) 83 7860 SW 197TH TERRACE 84 City MIAMI FL 85 Zip Code 33189	
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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 William J. Brantley (NOTE: Registered Agent signature required when reinstating) DATE 1995

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANTLEY, WILLIAM J	1.2 NAME	
STREET ADDRESS	7860 SW 197TH TERRACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33189	1.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANTLEY, AUDREY L	2.2 NAME	
STREET ADDRESS	7860 SW 197TH TERRACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33189	2.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOLLEMBECK, JUDY	3.2 NAME	
STREET ADDRESS	7888 STUART PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	WESTMINSTER CO 80030-4439	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FREELANDER, CHICHI J	4.2 NAME	
STREET ADDRESS	ROUTE 1 BOX 58	4.3 STREET ADDRESS	
CITY-ST-ZIP	LOYAL OK 73756	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANTLEY, STANLEY	5.2 NAME	
STREET ADDRESS	5251 ORDUNA DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL 33146	5.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANTLEY, LARRY K	6.2 NAME	
STREET ADDRESS	7860 SW 197TH TERRACE	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33189	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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William J. Brantley **WILLIAM J. BRANTLEY**
Date 4/2/97 Daytime Phone # 0033775

CR2E037 (9/96)